

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

HOUSE FREEDOM FUND

ADDRESS (number and street)

PO BOX 1948

Check if different  
than previously  
reported. (ACC)

ALEXANDRIA

VA

22313

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00552851

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
10 20 2016

through

M M / D D / Y Y Y Y Y Y  
11 28 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

BROWN, MEGAN, , ,

Type or Print Name of Treasurer

Signature of Treasurer

BROWN, MEGAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
12 07 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

HOUSE FREEDOM FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 20 / 2016 To: M M / D D / Y Y Y Y Y Y  
11 / 28 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">90559.90</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">118479.78</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">136382.77</span>	<span style="border: 1px solid black; padding: 2px;">1144349.59</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">254862.55</span>	<span style="border: 1px solid black; padding: 2px;">1234909.49</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">47280.71</span>	<span style="border: 1px solid black; padding: 2px;">1027327.65</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">207581.84</span>	<span style="border: 1px solid black; padding: 2px;">207581.84</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

HOUSE FREEDOM FUND

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		20		2016

To:

M M	/	D D	/	Y Y Y Y
11		28		2016

**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

73918.00

795894.77

(ii) Unitemized .....

53006.17

165635.17

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

126924.17

961529.94

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

5000.00

141600.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

131924.17

1103129.94

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

145.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

4458.60

41074.65

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

136382.77

1144349.59

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

136382.77

1144349.59

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	17115.71	351998.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	17115.71	351998.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30165.00	570329.00
24. Independent Expenditures (use Schedule E) .....	0.00	100000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	47280.71	1027327.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47280.71	1027327.65

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	131924.17	1103129.94
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	131924.17	1098129.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	17115.71	351998.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	145.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17115.71	351853.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ABBOTT, ROGER, , MR.,

Mailing Address 270 N HIGH POINT BLVD

City  
BOYNTON BEACH

State  
FL

Zip Code  
33435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2016

Transaction ID : SA11Al.16208

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALVARES, FRANCES, M., MRS.,

Mailing Address 7349 EATON CT

City  
UNIVERSITY PARK

State  
FL

Zip Code  
34201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : SA11Al.18483

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANTRIM, BENJAMIN, , ,

Mailing Address 100 LONDON PL

City  
GILROY

State  
CA

Zip Code  
95020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2016

Transaction ID : SA11Al.16211

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

460.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ATWATER, JANET, , MRS.,

Mailing Address 114 WHIPPOORWILL DR

City  
SENECAState  
SCZip Code  
29672FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18132

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AUMILLER, SALLY, ANN, ,

Mailing Address 5216 PERRYVILLE RD

City  
DANVILLEState  
KYZip Code  
40422FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18133

Amount of Each Receipt this Period

240.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BAPTIST, ERROL, C., MR.,

Mailing Address 5112 PARLIAMENT PL

City  
ROCKFORDState  
ILZip Code  
61107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
PEDIATRICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.18488

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

900.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARDIN, WILBUR, S., MR.,

Mailing Address 7990 GILARDI RD

City  
NEWCASTLE

State  
CA

Zip Code  
95658

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18138

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARNA, CARMELA, J., MS.,

Mailing Address 3545 E COCONINO ST

City  
PHOENIX

State  
AZ

Zip Code  
85044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANNER DESERT MED CENTER

Occupation (for Individual)  
PHAMACIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18139

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARNES, CONSTANCE, C., MS.,

Mailing Address 244 LIBERTY ST

City  
WARSAW

State  
NY

Zip Code  
14569

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18490

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARTLETT, JOHN, M., ,

Mailing Address 845 E SHORE DR

City  
CULVERState  
INZip Code  
46511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2016

Transaction ID : SA11AI.16603

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BATTLE, ROBERT, M., ,

Mailing Address 9910 LONG POINT RD

City  
HOUSTONState  
TXZip Code  
77055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMPREHENSIVE HEALTH ASSNOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2016

Transaction ID : SA11AI.18492

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BECK, JOAN, , ,

Mailing Address 15330 LIVE OAK SPRINGS CANYON RD

City  
CANYON COUNTRYState  
CAZip Code  
91387FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11AI.16624

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

650.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERRY, JAMES, O., ,

Mailing Address PO BOX 91652

City  
MOBILEState  
ALZip Code  
36691FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11AL16680

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BINDER, JUDITH, , ,

Mailing Address 380 PIERCE ST

City  
LAKEWOODState  
COZip Code  
80226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2016

Transaction ID : SA11AL17812

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BINDER, JUDITH, , ,

Mailing Address 380 PIERCE ST

City  
LAKEWOODState  
COZip Code  
80226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

180.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2016

Transaction ID : SA11AL17781

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BUDD-TRANS20161031

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BINDER, JUDITH, , ,

Mailing Address 380 PIERCE ST

City  
LAKEWOOD

State  
CO

Zip Code  
80226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17626

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BINDER, JUDITH, , ,

Mailing Address 380 PIERCE ST

City  
LAKEWOOD

State  
CO

Zip Code  
80226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.16572

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BINDER, JUDITH, , ,

Mailing Address 380 PIERCE ST

City  
LAKEWOOD

State  
CO

Zip Code  
80226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17750

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-GARRETT-TRANS20161026

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINDER, JUDITH, , ,**

Mailing Address 380 PIERCE ST

City  
LAKEWOOD

State  
CO

Zip Code  
80226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17719

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINDER, JUDITH, , ,**

Mailing Address 380 PIERCE ST

City  
LAKEWOOD

State  
CO

Zip Code  
80226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17688

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BINDER, JUDITH, , ,**

Mailing Address 380 PIERCE ST

City  
LAKEWOOD

State  
CO

Zip Code  
80226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17657

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BINKLEY, DENNIS, , ,

Mailing Address 1546 NW WOODBINE WAY

City  
SEATTLE

State  
WA

Zip Code  
98177

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEOSPACE INTERNATIONAL

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2016

Transaction ID : SA11Al.17793

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BUDD-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BINKLEY, DENNIS, , ,

Mailing Address 1546 NW WOODBINE WAY

City  
SEATTLE

State  
WA

Zip Code  
98177

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEOSPACE INTERNATIONAL

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2016

Transaction ID : SA11Al.17763

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BINKLEY, DENNIS, , ,

Mailing Address 1546 NW WOODBINE WAY

City  
SEATTLE

State  
WA

Zip Code  
98177

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEOSPACE INTERNATIONAL

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2016

Transaction ID : SA11Al.17823

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINKLEY, DENNIS, , ,**

Mailing Address 1546 NW WOODBINE WAY

City  
SEATTLE

State  
WA

Zip Code  
98177

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEOSPACE INTERNATIONAL

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 29 / 2016

Transaction ID : SA11AI.17731

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINKLEY, DENNIS, , ,**

Mailing Address 1546 NW WOODBINE WAY

City  
SEATTLE

State  
WA

Zip Code  
98177

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEOSPACE INTERNATIONAL

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 29 / 2016

Transaction ID : SA11AI.17700

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BINKLEY, DENNIS, , ,**

Mailing Address 1546 NW WOODBINE WAY

City  
SEATTLE

State  
WA

Zip Code  
98177

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEOSPACE INTERNATIONAL

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 29 / 2016

Transaction ID : SA11AI.17669

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BINKLEY, DENNIS, , ,

Mailing Address 1546 NW WOODBINE WAY

City  
SEATTLEState  
WAZip Code  
98177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEOSPACE INTERNATIONALOccupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2016

Transaction ID : SA11AI.17637

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BINKLEY, DENNIS, , ,

Mailing Address 1546 NW WOODBINE WAY

City  
SEATTLEState  
WAZip Code  
98177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEOSPACE INTERNATIONALOccupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2016

Transaction ID : SA11AI.16583

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLOOM, HAROLD, , ,

Mailing Address 2016 E 131ST AVE APT 4

City  
TAMPAState  
FLZip Code  
33612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

21.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.17786

Amount of Each Receipt this Period

3.00

☐ Memo Item

EM-BUDD-TRANS20161031

SUBTOTAL of Receipts This Page (optional).....▶

53.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 208

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLOOM, HAROLD, , ,**

Mailing Address 2016 E 131ST AVE APT 4

City  
TAMPAState  
FLZip Code  
33612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11AI.17817

Amount of Each Receipt this Period

3.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLOOM, HAROLD, , ,**

Mailing Address 2016 E 131ST AVE APT 4

City  
TAMPAState  
FLZip Code  
33612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11AI.17631

Amount of Each Receipt this Period

3.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLOOM, HAROLD, , ,**

Mailing Address 2016 E 131ST AVE APT 4

City  
TAMPAState  
FLZip Code  
33612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11AI.16577

Amount of Each Receipt this Period

3.00

☐ Memo Item

EM-BIGGS-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

9.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLOOM, HAROLD, , ,**

Mailing Address 2016 E 131ST AVE APT 4

City  
TAMPA

State  
FL

Zip Code  
33612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11Al.17755

Amount of Each Receipt this Period

3.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BLOOM, HAROLD, , ,**

Mailing Address 2016 E 131ST AVE APT 4

City  
TAMPA

State  
FL

Zip Code  
33612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11Al.17724

Amount of Each Receipt this Period

3.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLOOM, HAROLD, , ,**

Mailing Address 2016 E 131ST AVE APT 4

City  
TAMPA

State  
FL

Zip Code  
33612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

12.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11Al.17693

Amount of Each Receipt this Period

3.00

☐ Memo Item

EM-GOSAR-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLOOM, HAROLD, , ,

Mailing Address 2016 E 131ST AVE APT 4

City  
TAMPAState  
FLZip Code  
33612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11Al.17662

Amount of Each Receipt this Period

3.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOND, GARY, D., MR.,

Mailing Address 3126 S BOULEVARD

City  
EDMONDState  
OKZip Code  
73013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KSCOOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11Al.16218

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BORWICK, ALLAN, , MR.,

Mailing Address 192 E GRANT LINE RD

City  
TRACYState  
CAZip Code  
95376FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF TRACYOccupation (for Individual)  
BUDGET OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11Al.18155

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1503.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOSTIC, MICHAEL, , MR.,**

Mailing Address 1076 SILVER HILLS DR

City  
SENATOBIA

State  
MS

Zip Code  
38668

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16220

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYD, DONALD, , ,**

Mailing Address 645 LAWNWOOD DR

City  
GREENWOOD

State  
IN

Zip Code  
46142

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16683

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRISTOR, BILL, , , JR.**

Mailing Address 3621 BLUE HILL CT

City  
ELLCOTT CITY

State  
MD

Zip Code  
21042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18495

Amount of Each Receipt this Period

360.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1460.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROWN, WADE, , ,

Mailing Address 1396 BIG OAK RD

City  
GERMANTON

State  
NC

Zip Code  
27019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11Al.18163

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUNOFF, SUSAN, , ,

Mailing Address 334 W CEDAR ST

City  
NEW HOLLAND

State  
PA

Zip Code  
17557

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11Al.16222

Amount of Each Receipt this Period

720.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUNOFF, SUSAN, , ,

Mailing Address 334 W CEDAR ST

City  
NEW HOLLAND

State  
PA

Zip Code  
17557

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1195.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11Al.16872

Amount of Each Receipt this Period

160.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1080.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CALLEWAERT, JOSEPH, G., MR.,

Mailing Address 1184 W MAPLE RIDGE 37TH RD

City  
ROCKState  
MIZip Code  
49880FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16227

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMPBELL, WILLIAM, R., MR.,

Mailing Address 901 HUNTERS RDG

City

MARYVILLE

State

TN

Zip Code

37803

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16689

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAVENDER, ANN, E., MS.,

Mailing Address 1242 CROWN RIDGE DR

City

PRESCOTT

State

AZ

Zip Code

86301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18178

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

935.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHAPPELL, MARGARET, , ,**

Mailing Address 22 PRINCETON CT  
BASKING RIDGE

City

BASKING RIDGE

State

NJ

Zip Code

07920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.18497

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHRISTENSEN, FRANK, , ,**

Mailing Address 612 MARIPOSA AVE APT 103

City

OAKLAND

State

CA

Zip Code

94610

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ERMA DARLING

Occupation (for Individual)

APARTMENT MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.16639

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CLAIBORNE, WALTER, , ,**

Mailing Address 14217 CLAIBORNE RD

City

BATCHELOR

State

LA

Zip Code

70715

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

REAL ESTATE

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18185

Amount of Each Receipt this Period

200.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

530.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLARKIN, JOHN, , ,

Mailing Address 569 WILLIAMS CROSSING RD  
 COVENTRY

City  
 COVENTRY

State  
 RI

Zip Code  
 02816

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 VICOR

Occupation (for Individual)  
 ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11AI.16625

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLEVELAND, GEORGE, , MR.,

Mailing Address 224 CAMPBELL PL

City  
 JACKSONVILLE

State  
 NC

Zip Code  
 28546

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 INFORMATION REQUESTED

Occupation (for Individual)  
 INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11AI.16695

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLOVER, KATHLEEN, , ,

Mailing Address PO BOX 594

City  
 BAGDAD

State  
 FL

Zip Code  
 32530

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 INFORMATION REQUESTED

Occupation (for Individual)  
 INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2016

Transaction ID : SA11AI.16888

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

280.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COFFEY, THOMAS, G., MR.,

Mailing Address 180 7TH AVE S

City  
NAPLES

State  
FL

Zip Code  
34102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : SA11AI.17183

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONNOLLY, JOANNE, D., MRS.,

Mailing Address 17505 SW 84TH AVE

City  
PALMETTO BAY

State  
FL

Zip Code  
33157

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16234

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CORGAN, JACK, , ,

Mailing Address 6651 LAKESHORE DR

City  
DALLAS

State  
TX

Zip Code  
75214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16698

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

5350.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COUNTS, MITCH, , ,**

Mailing Address 103 ROB ROY CT

City  
FRANKLIN

State  
TN

Zip Code  
37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BELMONT UNIVERSITY COLLEGE OF LAW

Occupation (for Individual)

LAW PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18090

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANIEL, KEVIN, , ,**

Mailing Address 653 LAKESHORE DR

City  
KINGSTON

State  
TN

Zip Code  
37763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CBWW

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17809

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DANIEL, KEVIN, , ,**

Mailing Address 653 LAKESHORE DR

City  
KINGSTON

State  
TN

Zip Code  
37763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CBWW

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

90.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17778

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BUDD-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DANIEL, KEVIN, , ,**

Mailing Address 653 LAKESHORE DR

City  
KINGSTON

State  
TN

Zip Code  
37763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CBWW

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

65.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17623

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANIEL, KEVIN, , ,**

Mailing Address 653 LAKESHORE DR

City  
KINGSTON

State  
TN

Zip Code  
37763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CBWW

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.16569

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DANIEL, KEVIN, , ,**

Mailing Address 653 LAKESHORE DR

City  
KINGSTON

State  
TN

Zip Code  
37763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CBWW

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17747

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-GARRETT-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 208  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DANIEL, KEVIN, , ,**

Mailing Address 653 LAKESHORE DR

City  
KINGSTON

State  
TN

Zip Code  
37763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CBWW

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17716

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANIEL, KEVIN, , ,**

Mailing Address 653 LAKESHORE DR

City  
KINGSTON

State  
TN

Zip Code  
37763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CBWW

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17685

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DANIEL, KEVIN, , ,**

Mailing Address 653 LAKESHORE DR

City  
KINGSTON

State  
TN

Zip Code  
37763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CBWW

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17654

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAWSON, MAE, , ,

Mailing Address PO BOX 157

City  
FULTONState  
TXZip Code  
78358FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE BAG LADYOccupation (for Individual)  
GARBAGE SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2016

Transaction ID : SA11AI.16615

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAWSON, MAE, , ,

Mailing Address PO BOX 157

City  
FULTONState  
TXZip Code  
78358FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE BAG LADYOccupation (for Individual)  
GARBAGE SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2016

Transaction ID : SA11AI.18649

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEATER, THOMAS, , ,

Mailing Address 17276 BEACH RIDGE WAY

City  
WEST OLIVEState  
MIZip Code  
49460FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Transaction ID : SA11AI.18201

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

300.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEHLIN, MARK, , ,**

Mailing Address 2796 KINGWOOD PIKE

City  
MORGANTOWN

State  
WV

Zip Code  
26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATRIC

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17792

Amount of Each Receipt this Period

15.00

☐ Memo Item

EM-BUDD-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEHLIN, MARK, , ,**

Mailing Address 2796 KINGWOOD PIKE

City  
MORGANTOWN

State  
WV

Zip Code  
26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATRIC

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17762

Amount of Each Receipt this Period

15.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEHLIN, MARK, , ,**

Mailing Address 2796 KINGWOOD PIKE

City  
MORGANTOWN

State  
WV

Zip Code  
26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATRIC

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17822

Amount of Each Receipt this Period

15.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEHLIN, MARK, , ,**

Mailing Address 2796 KINGWOOD PIKE

City  
MORGANTOWN

State  
WV

Zip Code  
26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MATRIC

Occupation (for Individual)

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17730

Amount of Each Receipt this Period

15.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEHLIN, MARK, , ,**

Mailing Address 2796 KINGWOOD PIKE

City  
MORGANTOWN

State  
WV

Zip Code  
26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MATRIC

Occupation (for Individual)

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17699

Amount of Each Receipt this Period

15.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEHLIN, MARK, , ,**

Mailing Address 2796 KINGWOOD PIKE

City  
MORGANTOWN

State  
WV

Zip Code  
26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MATRIC

Occupation (for Individual)

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17668

Amount of Each Receipt this Period

15.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DEHLIN, MARK, , ,

Mailing Address 2796 KINGWOOD PIKE

City  
MORGANTOWN

State  
WV

Zip Code  
26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATRIC

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

185.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 28 / 2016

Transaction ID : SA11Al.17636

Amount of Each Receipt this Period

15.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEHLIN, MARK, , ,

Mailing Address 2796 KINGWOOD PIKE

City  
MORGANTOWN

State  
WV

Zip Code  
26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATRIC

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

170.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 28 / 2016

Transaction ID : SA11Al.16582

Amount of Each Receipt this Period

15.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEXTER, PENNA, , ,

Mailing Address 3705 STONINGTON DR

City  
PLANO

State  
TX

Zip Code  
75093

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
RADIO HOST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11Al.16703

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

530.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIPRIMA, MICHAEL, , MR.,**

Mailing Address PO BOX 318

City  
ARMUCHEE

State  
GA

Zip Code  
30105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11AI.16653

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOWNEY, JAMES, , ,**

Mailing Address 26000 NEW BRIDGE DR

City  
LOS ALTOS HILLS

State  
CA

Zip Code  
94022

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRESIDENT

Occupation (for Individual)  
ALTOS SONOMA CORP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16706

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOWNEY, JAMES, , ,**

Mailing Address 26000 NEW BRIDGE DR

City  
LOS ALTOS HILLS

State  
CA

Zip Code  
94022

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRESIDENT

Occupation (for Individual)  
ALTOS SONOMA CORP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.18211

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUNKUM, ELLIS, , ,

Mailing Address 9800 ST JULIANS LN

City  
RICHMOND

State  
VA

Zip Code  
23238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16240

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUNN, DENNIS, H., ,

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City  
KIRKLAND

State  
WA

Zip Code  
98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11AI.17824

Amount of Each Receipt this Period

200.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUNN, DENNIS, H., ,

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City  
KIRKLAND

State  
WA

Zip Code  
98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11AI.17732

Amount of Each Receipt this Period

200.00

☐ Memo Item

EM-BLUM-TRANS20161031

SUBTOTAL of Receipts This Page (optional).....▶

500.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNN, DENNIS, H., ,**

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City  
KIRKLAND

State  
WA

Zip Code  
98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11AI.17701

Amount of Each Receipt this Period

200.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNN, DENNIS, H., ,**

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City  
KIRKLAND

State  
WA

Zip Code  
98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11AI.17670

Amount of Each Receipt this Period

200.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNN, DENNIS, H., ,**

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City  
KIRKLAND

State  
WA

Zip Code  
98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11AI.17638

Amount of Each Receipt this Period

200.00

☐ Memo Item

EM-BANKS-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUNN, DENNIS, H., ,

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City  
KIRKLAND

State  
WA

Zip Code  
98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11AI.16584

Amount of Each Receipt this Period

200.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUNN, DENNIS, H., ,

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City  
KIRKLAND

State  
WA

Zip Code  
98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11AI.16654

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUNN, DENNIS, H., ,

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City  
KIRKLAND

State  
WA

Zip Code  
98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11AI.17794

Amount of Each Receipt this Period

200.00

☐ Memo Item

EM-BUDD-TRANS20161031

SUBTOTAL of Receipts This Page (optional).....▶

900.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUNN, DENNIS, H., ,

Mailing Address 4817 LAKE WASHINGTON BLVD NE APT 3

City  
KIRKLANDState  
WAZip Code  
98033FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2016

Transaction ID : SA11AI.17764

Amount of Each Receipt this Period

100.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EARLEY, JOSEPH, , ,

Mailing Address 124 MEADOW LN

City  
RAYMONDState  
WAZip Code  
98577FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2016

Transaction ID : SA11AI.18600

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ECKMAN, JACK, H., MR.,

Mailing Address 11216 EMERY ST

City  
EL MONTEState  
CAZip Code  
91731FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2016

Transaction ID : SA11AI.17123

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

630.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ECKMAN, JACK, H., MR.,**

Mailing Address 11216 EMERY ST

City  
EL MONTEState  
CAZip Code  
91731FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2016

Transaction ID : SA11AI.18507

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FAKULT, JOHN, , MR.,**

Mailing Address 232 E 293RD ST

City  
WILLOWICKState  
OHZip Code  
44095FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2016

Transaction ID : SA11AI.16243

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FILIPPONE, LINDA, , MS.,**

Mailing Address 4202 68TH ST

City  
LUBBOCKState  
TXZip Code  
79413FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Transaction ID : SA11AI.18224

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FITZGERALD, GERALD, J., MR.,**

Mailing Address PO BOX 27376

City  
OMAHA

State  
NE

Zip Code  
68127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16246

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLORES, LEO, , ,**

Mailing Address 2234 E GREENVILLE DR

City  
WEST COVINA

State  
CA

Zip Code  
91791

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18105

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GOSAR-TRANS20161108

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLORES, LEO, , ,**

Mailing Address 2234 E GREENVILLE DR

City  
WEST COVINA

State  
CA

Zip Code  
91791

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18108

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GARRETT-TRANS20161108

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLORES, LEO, , ,**

Mailing Address 2234 E GREENVILLE DR

City  
WEST COVINA

State  
CA

Zip Code  
91791

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18104

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-JOHNSON-TRANS20161108

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLORES, LEO, , ,**

Mailing Address 2234 E GREENVILLE DR

City  
WEST COVINA

State  
CA

Zip Code  
91791

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18111

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-DAVIDSON-TRANS20161108

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLORES, LEO, , ,**

Mailing Address 2234 E GREENVILLE DR

City  
WEST COVINA

State  
CA

Zip Code  
91791

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18103

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BANKS-TRANS20161108

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 208  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLORES, LEO, , ,**

Mailing Address 2234 E GREENVILLE DR

City  
WEST COVINA

State  
CA

Zip Code  
91791

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18110

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BUDD-TRANS20161108

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLORES, LEO, , ,**

Mailing Address 2234 E GREENVILLE DR

City  
WEST COVINA

State  
CA

Zip Code  
91791

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18106

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BLUM-TRANS20161108

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLORES, LEO, , ,**

Mailing Address 2234 E GREENVILLE DR

City  
WEST COVINA

State  
CA

Zip Code  
91791

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18102

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BIGGS-TRANS20161108

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 208  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FOX, STEPHEN, , ,**

Mailing Address 3450 DULUTH PARK LN

City  
DULUTH

State  
GA

Zip Code  
30096

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : SA11AI.18514

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLO, FRANCO, , ,**

Mailing Address 3 BLOSSOM RD

City  
MOUNT SINAI

State  
NY

Zip Code  
11766

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GASTROENTEROLOGY ASSOCIATES OF SUFFOLK

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17820

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLO, FRANCO, , ,**

Mailing Address 3 BLOSSOM RD

City  
MOUNT SINAI

State  
NY

Zip Code  
11766

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GASTROENTEROLOGY ASSOCIATES OF SUFFOLK

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17789

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BUDD-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GALLO, FRANCO, , ,

Mailing Address 3 BLOSSOM RD

City  
MOUNT SINAI

State  
NY

Zip Code  
11766

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GASTROENTEROLOGY ASSOCIATES OF SUFFOLK

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17634

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GALLO, FRANCO, , ,

Mailing Address 3 BLOSSOM RD

City  
MOUNT SINAI

State  
NY

Zip Code  
11766

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GASTROENTEROLOGY ASSOCIATES OF SUFFOLK

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.16580

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GALLO, FRANCO, , ,

Mailing Address 3 BLOSSOM RD

City  
MOUNT SINAI

State  
NY

Zip Code  
11766

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GASTROENTEROLOGY ASSOCIATES OF SUFFOLK

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17758

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-GARRETT-TRANS20161026

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GALLO, FRANCO, , ,**

Mailing Address 3 BLOSSOM RD

City  
MOUNT SINAI

State  
NY

Zip Code  
11766

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GASTROENTEROGY ASSOCIATES OF SUFFOLK

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17727

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GALLO, FRANCO, , ,**

Mailing Address 3 BLOSSOM RD

City  
MOUNT SINAI

State  
NY

Zip Code  
11766

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GASTROENTEROGY ASSOCIATES OF SUFFOLK

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17696

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLO, FRANCO, , ,**

Mailing Address 3 BLOSSOM RD

City  
MOUNT SINAI

State  
NY

Zip Code  
11766

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GASTROENTEROGY ASSOCIATES OF SUFFOLK

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17665

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILL, GREG, , ,**

Mailing Address 5 PATRA

City  
LAGUNA NIGUEL

State  
CA

Zip Code  
92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FITNESS INTL

Occupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16491

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILL, GREG, , ,**

Mailing Address 5 PATRA

City  
LAGUNA NIGUEL

State  
CA

Zip Code  
92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FITNESS INTL

Occupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16505

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILL, GREG, , ,**

Mailing Address 5 PATRA

City  
LAGUNA NIGUEL

State  
CA

Zip Code  
92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FITNESS INTL

Occupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16463

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BANKS-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILL, GREG, , ,**

Mailing Address 5 PATRA

City  
LAGUNA NIGUEL

State  
CA

Zip Code  
92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FITNESS INTL

Occupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16201

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BIGGS-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILL, GREG, , ,**

Mailing Address 5 PATRA

City  
LAGUNA NIGUEL

State  
CA

Zip Code  
92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FITNESS INTL

Occupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16484

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BLUM-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILL, GREG, , ,**

Mailing Address 5 PATRA

City  
LAGUNA NIGUEL

State  
CA

Zip Code  
92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FITNESS INTL

Occupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16498

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BUDD-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 46 OF 208  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILL, GREG, , ,**

Mailing Address 5 PATRA

City  
LAGUNA NIGUELState  
CAZip Code  
92677FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FITNESS INTLOccupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11AI.16477

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-GOSAR-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILL, GREG, , ,**

Mailing Address 5 PATRA

City  
LAGUNA NIGUELState  
CAZip Code  
92677FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FITNESS INTLOccupation (for Individual)  
MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11AI.16470

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-JOHNSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GORDON, MARIA, , MS.,**Mailing Address 805 MOUNT AUBURN ST APT 44  
WATERTOWNCity  
WATERTOWNState  
MAZip Code  
02472FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11AI.18238

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

80.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GORMAN, JAMES, , MR.,

Mailing Address PO BOX 2599

MANSFIELD

City

MANSFIELD

State

OH

Zip Code

44906

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GORMAN RUPP

Occupation (for Individual)

CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2016

Transaction ID : SA11AI.16253

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOSSELIN, RICHARD, , ,

Mailing Address 2834B MONROE LN

City

GRAND JUNCTION

State

CO

Zip Code

81503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2016

Transaction ID : SA11AI.17813

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOSSELIN, RICHARD, , ,

Mailing Address 2834B MONROE LN

City

GRAND JUNCTION

State

CO

Zip Code

81503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2016

Transaction ID : SA11AI.17782

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BUDD-TRANS20161031

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1010.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 48 OF 208  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOSSELIN, RICHARD, , ,**

Mailing Address 2834B MONROE LN

City  
GRAND JUNCTIONState  
COZip Code  
81503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11AI.17627

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOSSELIN, RICHARD, , ,**

Mailing Address 2834B MONROE LN

City  
GRAND JUNCTIONState  
COZip Code  
81503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11AI.16573

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOSSELIN, RICHARD, , ,**

Mailing Address 2834B MONROE LN

City  
GRAND JUNCTIONState  
COZip Code  
81503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11AI.17751

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-GARRETT-TRANS20161026

SUBTOTAL of Receipts This Page (optional)..... ►

15.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOSSELIN, RICHARD, , ,**

Mailing Address 2834B MONROE LN

City

GRAND JUNCTION

State

CO

Zip Code

81503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17720

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOSSELIN, RICHARD, , ,**

Mailing Address 2834B MONROE LN

City

GRAND JUNCTION

State

CO

Zip Code

81503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17689

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOSSELIN, RICHARD, , ,**

Mailing Address 2834B MONROE LN

City

GRAND JUNCTION

State

CO

Zip Code

81503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17658

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRAF, MAEJEL, A., MRS.,

Mailing Address 68 ELENA AVE

City  
ATHERTON

State  
CA

Zip Code  
94027

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
U.S. CONSTITUTION

Occupation (for Individual)  
PRESERRING FREEDOM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.16932

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREEN, RAYMOND, , ,

Mailing Address 821 VAL VISTA WAY

City  
AUBURN

State  
CA

Zip Code  
95603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16506

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, RAYMOND, , ,

Mailing Address 821 VAL VISTA WAY

City  
AUBURN

State  
CA

Zip Code  
95603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16464

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BANKS-TRANS20161026

SUBTOTAL of Receipts This Page (optional).....▶

350.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 208  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, RAYMOND, , ,**

Mailing Address 821 VAL VISTA WAY

City  
AUBURN

State  
CA

Zip Code  
95603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16202

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BIGGS-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, RAYMOND, , ,**

Mailing Address 821 VAL VISTA WAY

City  
AUBURN

State  
CA

Zip Code  
95603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16485

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BLUM-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, RAYMOND, , ,**

Mailing Address 821 VAL VISTA WAY

City  
AUBURN

State  
CA

Zip Code  
95603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16499

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BUDD-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GREEN, RAYMOND, , ,

Mailing Address 821 VAL VISTA WAY

City  
AUBURN

State  
CA

Zip Code  
95603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11Al.16478

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GOSAR-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREEN, RAYMOND, , ,

Mailing Address 821 VAL VISTA WAY

City  
AUBURN

State  
CA

Zip Code  
95603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11Al.16471

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-JOHNSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, RAYMOND, , ,

Mailing Address 821 VAL VISTA WAY

City  
AUBURN

State  
CA

Zip Code  
95603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11Al.16492

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GARRETT-TRANS20161026

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUDGEON, GERRY, , MRS.,

Mailing Address 7409 HAPPY HOLLOW RD

City  
STANWOODState  
WAZip Code  
98292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16257

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAPKE, CHARLES, , ,

Mailing Address 141 E MADISON AVE APT 408

City  
KIRKWOODState  
MOZip Code  
63122FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
ATTY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.16616

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRIS, ELLIE, , ,

Mailing Address 1502 COUNTRY CLUB DR

City  
ESTES PARKState  
COZip Code  
80517FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16261

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

760.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, ARTHUR, , ,

Mailing Address 4801 PEBBLE BROOK DR

City  
OLDSMARState  
FLZip Code  
34677FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16733

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAZI, ANDREW, , ,

Mailing Address 1830 TEPUSQUET RD

City  
SANTA MARIAState  
CAZip Code  
93454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2016

Transaction ID : SA11AI.17810

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAZI, ANDREW, , ,

Mailing Address 1830 TEPUSQUET RD

City  
SANTA MARIAState  
CAZip Code  
93454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2016

Transaction ID : SA11AI.17779

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BUDD-TRANS20161031

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAZI, ANDREW, , ,

Mailing Address 1830 TEPUSQUET RD

City  
SANTA MARIA

State  
CA

Zip Code  
93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2016

Transaction ID : SA11AI.17624

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAZI, ANDREW, , ,

Mailing Address 1830 TEPUSQUET RD

City  
SANTA MARIA

State  
CA

Zip Code  
93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2016

Transaction ID : SA11AI.16570

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAZI, ANDREW, , ,

Mailing Address 1830 TEPUSQUET RD

City  
SANTA MARIA

State  
CA

Zip Code  
93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2016

Transaction ID : SA11AI.17748

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GARRETT-TRANS20161026

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAZI, ANDREW, , ,

Mailing Address 1830 TEPUSQUET RD

City  
SANTA MARIA

State  
CA

Zip Code  
93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2016

Transaction ID : SA11AI.17717

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAZI, ANDREW, , ,

Mailing Address 1830 TEPUSQUET RD

City  
SANTA MARIA

State  
CA

Zip Code  
93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2016

Transaction ID : SA11AI.17686

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAZI, ANDREW, , ,

Mailing Address 1830 TEPUSQUET RD

City  
SANTA MARIA

State  
CA

Zip Code  
93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2016

Transaction ID : SA11AI.17655

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEERVAGEN, KAREN, , ,

Mailing Address 203 E NIAGARA AVE

City  
ELMHURSTState  
ILZip Code  
60126FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18261

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HENDRICKS, MICHAEL, , ,

Mailing Address 738 RICHVALE LN

City  
HOUSTONState  
TXZip Code  
77062FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AAA TEXASOccupation (for Individual)  
CLAIMS ADJUSTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18089

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILDEBRANDT, RAYMOND, , ,

Mailing Address 8836 EMBASSY DR

City  
STERLING HEIGHTSState  
MIZip Code  
48313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KROGEROccupation (for Individual)  
RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18109

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BUDD-TRANS20161108

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HILLMAN, ROBERTA, W., ,

Mailing Address 504 W BLEEKER ST

City  
ASPENState  
COZip Code  
81611FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2016

Transaction ID : SA11AI.18522

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILLMAN, TATNALL, , CAPT,

Mailing Address 504 W BLEEKER ST

City  
ASPENState  
COZip Code  
81611FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2016

Transaction ID : SA11AI.18637

Amount of Each Receipt this Period

5400.00

☐ Memo Item

EM-JOHNSON-TRANS20161108-02

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILLMAN, TATNALL, , CAPT,

Mailing Address 504 W BLEEKER ST

City  
ASPENState  
COZip Code  
81611FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2016

Transaction ID : SA11AI.18521

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HILLMAN, ROBERTA, W., ,**

Mailing Address 504 W BLEEKER ST

City  
ASPEN

State  
CO

Zip Code  
81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 07 / 2016

Transaction ID : SA11AI.18636

Amount of Each Receipt this Period

2000.00

☐ Memo Item

EM-GARRETT-TRANS20161108-02

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HILLMAN, TATNALL, , CAPT,**

Mailing Address 504 W BLEEKER ST

City  
ASPEN

State  
CO

Zip Code  
81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 07 / 2016

Transaction ID : SA11AI.18635

Amount of Each Receipt this Period

2700.00

☐ Memo Item

EM-GARRETT-TRANS20161108-02

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILLMAN, ROBERTA, W., ,**

Mailing Address 504 W BLEEKER ST

City  
ASPEN

State  
CO

Zip Code  
81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

12400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 07 / 2016

Transaction ID : SA11AI.18638

Amount of Each Receipt this Period

5400.00

☐ Memo Item

EM-JOHNSON-TRANS20161108-02

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 208  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMER, R.E., , ,**

Mailing Address 78 BITTERSWEET LN

City  
NEW CANAAN

State  
CT

Zip Code  
06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16500

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BUDD-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLMER, R.E., , ,**

Mailing Address 78 BITTERSWEET LN

City  
NEW CANAAN

State  
CT

Zip Code  
06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16479

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GOSAR-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMER, R.E., , ,**

Mailing Address 78 BITTERSWEET LN

City  
NEW CANAAN

State  
CT

Zip Code  
06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16493

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GARRETT-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLMER, R.E., , ,**

Mailing Address 78 BITTERSWEET LN

City  
NEW CANAAN

State  
CT

Zip Code  
06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16507

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLMER, R.E., , ,**

Mailing Address 78 BITTERSWEET LN

City  
NEW CANAAN

State  
CT

Zip Code  
06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16465

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BANKS-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLMER, R.E., , ,**

Mailing Address 78 BITTERSWEET LN

City  
NEW CANAAN

State  
CT

Zip Code  
06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16486

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BLUM-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLTZ, GLORIA, , ,**

Mailing Address 3084 ADIRONDACK CT  
WESTLAKE VILLAGE

City State Zip Code  
WESTLAKE VILLAGE CA 91362

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.16954

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOPPING, STEPHANIE, , ,**

Mailing Address 6216 MARLBOROUGH DR

City State Zip Code  
GOLETA CA 93117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDUCATIONAL TESTING SERVICES

Occupation (for Individual)  
SAT ESSAY RATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16578

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOPPING, STEPHANIE, , ,**

Mailing Address 6216 MARLBOROUGH DR

City State Zip Code  
GOLETA CA 93117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDUCATIONAL TESTING SERVICES

Occupation (for Individual)  
SAT ESSAY RATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.17756

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-GARRETT-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOPPING, STEPHANIE, , ,

Mailing Address 6216 MARLBOROUGH DR

City  
GOLETA

State  
CA

Zip Code  
93117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDUCATIONAL TESTING SERVICES

Occupation (for Individual)  
SAT ESSAY RATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.17725

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOPPING, STEPHANIE, , ,

Mailing Address 6216 MARLBOROUGH DR

City  
GOLETA

State  
CA

Zip Code  
93117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDUCATIONAL TESTING SERVICES

Occupation (for Individual)  
SAT ESSAY RATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.17694

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOPPING, STEPHANIE, , ,

Mailing Address 6216 MARLBOROUGH DR

City  
GOLETA

State  
CA

Zip Code  
93117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDUCATIONAL TESTING SERVICES

Occupation (for Individual)  
SAT ESSAY RATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.17663

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOPPING, STEPHANIE, , ,

Mailing Address 6216 MARLBOROUGH DR

City  
GOLETAState  
CAZip Code  
93117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDUCATIONAL TESTING SERVICESOccupation (for Individual)  
SAT ESSAY RATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11Al.17818

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOPPING, STEPHANIE, , ,

Mailing Address 6216 MARLBOROUGH DR

City  
GOLETAState  
CAZip Code  
93117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDUCATIONAL TESTING SERVICESOccupation (for Individual)  
SAT ESSAY RATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11Al.17787

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BUDD-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOPPING, STEPHANIE, , ,

Mailing Address 6216 MARLBOROUGH DR

City  
GOLETAState  
CAZip Code  
93117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDUCATIONAL TESTING SERVICESOccupation (for Individual)  
SAT ESSAY RATER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11Al.17632

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BANKS-TRANS20161031

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

30.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 208  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOROHAN, JOHN, , ,**

Mailing Address 35999 KALIFORNSKY BEACH RD

City  
KENAI

State  
AK

Zip Code  
99611

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11Al.16955

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOSKINS, DONALD, , ,**

Mailing Address 3476 SPRINGHILL RD

City

LAFAYETTE

State

CA

Zip Code

94549

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11Al.16618

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOUGH, T., , ,**

Mailing Address 1050 LONGVIEW RD

City

KING OF PRUSSIA

State

PA

Zip Code

19406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11Al.16742

Amount of Each Receipt this Period

120.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

340.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IONATA, FRED, , MR.,**

Mailing Address 1782 ROYAL OAK PL W  
DUNEDIN

City  
DUNEDIN

State  
FL

Zip Code  
34698

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16268

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IONATA, FRED, , MR.,**

Mailing Address 1782 ROYAL OAK PL W  
DUNEDIN

City  
DUNEDIN

State  
FL

Zip Code  
34698

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18274

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACK, CAROL, , ,**

Mailing Address 24 QUADRA CT

City  
CHICO

State  
CA

Zip Code  
95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17628

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BANKS-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACK, CAROL, , ,**

Mailing Address 24 QUADRA CT

City  
CHICO

State  
CA

Zip Code  
95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.16574

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACK, CAROL, , ,**

Mailing Address 24 QUADRA CT

City  
CHICO

State  
CA

Zip Code  
95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17752

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACK, CAROL, , ,**

Mailing Address 24 QUADRA CT

City  
CHICO

State  
CA

Zip Code  
95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17721

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BLUM-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACK, CAROL, , ,**

Mailing Address 24 QUADRA CT

City  
CHICO

State  
CA

Zip Code  
95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

**Transaction ID : SA11AI.17690**

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACK, CAROL, , ,**

Mailing Address 24 QUADRA CT

City  
CHICO

State  
CA

Zip Code  
95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

**Transaction ID : SA11AI.17659**

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACK, CAROL, , ,**

Mailing Address 24 QUADRA CT

City  
CHICO

State  
CA

Zip Code  
95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

**Transaction ID : SA11AI.17814**

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JACK, CAROL, , ,

Mailing Address 24 QUADRA CT

City  
CHICOState  
CAZip Code  
95928FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11Al.17783

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BUDD-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACKSON, BRIAN, , ,

Mailing Address 7014 SHAY CT  
HIGHLANDCity  
HIGHLANDState  
CAZip Code  
92346FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11Al.18276

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, KENNETH, , ,

Mailing Address 2165 STOPPER DR

City  
MONTROUSVILLEState  
PAZip Code  
17754FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11Al.16273

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

365.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, RAY, , MR.,

Mailing Address 9606 N 117TH ST

City  
SCOTTSDALE

State  
AZ

Zip Code  
85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11Al.18278

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, JAMES, M., MR.,

Mailing Address 4510 S KOMENSKY AVE

City  
CHICAGO

State  
IL

Zip Code  
60632

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REAL ESTATE REALTOR

Occupation (for Individual)  
SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11Al.16274

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAMPFER, JAMES, , ,

Mailing Address 1305 MONTE VISTA DR

City  
GADSDEN

State  
AL

Zip Code  
35904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11Al.17821

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

SUBTOTAL of Receipts This Page (optional)..... ►

2405.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 208  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAMPFER, JAMES, , ,**

Mailing Address 1305 MONTE VISTA DR

City  
GADSDEN

State  
AL

Zip Code  
35904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AL17790

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BUDD-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAMPFER, JAMES, , ,**

Mailing Address 1305 MONTE VISTA DR

City  
GADSDEN

State  
AL

Zip Code  
35904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AL17635

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAMPFER, JAMES, , ,**

Mailing Address 1305 MONTE VISTA DR

City  
GADSDEN

State  
AL

Zip Code  
35904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AL16581

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BIGGS-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KAMPFER, JAMES, , ,

Mailing Address 1305 MONTE VISTA DR

City  
GADSDENState  
ALZip Code  
35904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11Al.17759

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAMPFER, JAMES, , ,

Mailing Address 1305 MONTE VISTA DR

City  
GADSDENState  
ALZip Code  
35904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11Al.17728

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAMPFER, JAMES, , ,

Mailing Address 1305 MONTE VISTA DR

City  
GADSDENState  
ALZip Code  
35904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11Al.17697

Amount of Each Receipt this Period

5.00

☐ Memo Item

EM-GOSAR-TRANS20161031

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KAMPFER, JAMES, , ,

Mailing Address 1305 MONTE VISTA DR

City  
GADSDEN

State  
AL

Zip Code  
35904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11Al.17666

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLENBERGER, WILLIAM, , MR.,

Mailing Address 8020 STILLBROOKE RD

City  
MANASSAS

State  
VA

Zip Code  
20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11Al.16571

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELLENBERGER, WILLIAM, , MR.,

Mailing Address 8020 STILLBROOKE RD

City  
MANASSAS

State  
VA

Zip Code  
20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11Al.17749

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-GARRETT-TRANS20161026

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELLENBERGER, WILLIAM, , MR.,

Mailing Address 8020 STILLBROOKE RD

City  
MANASSAS

State  
VA

Zip Code  
20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11Al.17718

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLENBERGER, WILLIAM, , MR.,

Mailing Address 8020 STILLBROOKE RD

City  
MANASSAS

State  
VA

Zip Code  
20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11Al.17687

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELLENBERGER, WILLIAM, , MR.,

Mailing Address 8020 STILLBROOKE RD

City  
MANASSAS

State  
VA

Zip Code  
20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : SA11Al.17656

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELLENBERGER, WILLIAM, , MR.,**

Mailing Address 8020 STILLBROOKE RD

City  
MANASSAS

State  
VA

Zip Code  
20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 24 / 2016

**Transaction ID : SA11AI.16608**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELLENBERGER, WILLIAM, , MR.,**

Mailing Address 8020 STILLBROOKE RD

City  
MANASSAS

State  
VA

Zip Code  
20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 24 / 2016

**Transaction ID : SA11AI.17811**

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KELLENBERGER, WILLIAM, , MR.,**

Mailing Address 8020 STILLBROOKE RD

City  
MANASSAS

State  
VA

Zip Code  
20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 24 / 2016

**Transaction ID : SA11AI.17780**

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BUDD-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELLENBERGER, WILLIAM, , MR.,

Mailing Address 8020 STILLBROOKE RD

City  
MANASSAS

State  
VA

Zip Code  
20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2016

Transaction ID : SA11AI.17625

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KINN, FRANK, , ,

Mailing Address 1312 STRATFORD LN

City  
FOSTORIA

State  
OH

Zip Code  
44830

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2016

Transaction ID : SA11AI.18287

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KITTREDGE, ROBERT, M., MR.,

Mailing Address 622 N DARTMOUTH RD

City  
SPOKANE VALLEY

State  
WA

Zip Code  
99206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Transaction ID : SA11AI.18288

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KNITTLE, F. JAMES, , ,

Mailing Address 151 NAOMI DR

City  
OCEAN VIEW

State  
DE

Zip Code  
19970

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16281

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOSCIOLEK, SYLVIA, M., MS.,

Mailing Address 12228 WOODLINE DR

City  
FENTON

State  
MI

Zip Code  
48430

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18294

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOTCIAN, JOHN, , ,

Mailing Address 204 SKYLINE DR

City  
MIDDLEBURY

State  
CT

Zip Code  
06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

24.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16480

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-GOSAR-TRANS20161026

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

706.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOTCIAN, JOHN, , ,

Mailing Address 204 SKYLINE DR

City  
MIDDLEBURY

State  
CT

Zip Code  
06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16494

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOTCIAN, JOHN, , ,

Mailing Address 204 SKYLINE DR

City  
MIDDLEBURY

State  
CT

Zip Code  
06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16472

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-JOHNSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOTCIAN, JOHN, , ,

Mailing Address 204 SKYLINE DR

City  
MIDDLEBURY

State  
CT

Zip Code  
06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

48.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16508

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

18.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOTCIAN, JOHN, , ,**

Mailing Address 204 SKYLINE DR

City  
MIDDLEBURY

State  
CT

Zip Code  
06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16466

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-BANKS-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOTCIAN, JOHN, , ,**

Mailing Address 204 SKYLINE DR

City  
MIDDLEBURY

State  
CT

Zip Code  
06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16487

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-BLUM-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOTCIAN, JOHN, , ,**

Mailing Address 204 SKYLINE DR

City  
MIDDLEBURY

State  
CT

Zip Code  
06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

42.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16501

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-BUDD-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

18.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOTCIAN, JOHN, , ,**

Mailing Address 204 SKYLINE DR

City  
MIDDLEBURY

State  
CT

Zip Code  
06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16203

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-BIGGS-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANDEFELD, CRAIG, , ,**

Mailing Address 60410 APACHE LN

City  
WASHINGTON

State  
MI

Zip Code  
48094

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : SA11AI.18529

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LASERSOHN, THOMAS, , MR.,**

Mailing Address 304 NORTH AVE

City  
WESTPORT

State  
CT

Zip Code  
06880

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.18301

Amount of Each Receipt this Period

800.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

886.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LASTER, JEAN, , ,

Mailing Address 200 MAJESTIC OAKS DR APT 419

City  
SHREVEPORT

State  
LA

Zip Code  
71115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LASTER FAMILY LTD. PTNSP.

Occupation (for Individual)  
CLERICAL/BOOKKEEPING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2016

Transaction ID : SA11AI.16601

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAWLOR, MARGARET, M., MS.,

Mailing Address 5617 S HOMAN AVE

City  
CHICAGO

State  
IL

Zip Code  
60629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2016

Transaction ID : SA11AI.16283

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEHMAN, RICHARD, , ,

Mailing Address PO BOX 662

City  
LAKE KATRINE

State  
NY

Zip Code  
12449

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Transaction ID : SA11AI.18303

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

600.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEMKE, ROBERT, , MR.,

Mailing Address 713 TERRY DR

City  
JOLIETState  
ILZip Code  
60435FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Transaction ID : SA11AI.18304

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, VERNON, F., ,

Mailing Address 204 E SANTA CRUZ DR

City  
GOODYEARState  
AZZip Code  
85338FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2016

Transaction ID : SA11AI.18534

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, CHERRY, , ,

Mailing Address 3407 188TH ST NW

City  
STANWOODState  
WAZip Code  
98292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 09 / 2016

Transaction ID : SA11AI.18602

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

235.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 208  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDEMANN, KEN, , MR.,**

Mailing Address 1660 HOFFMAN RD APT 335

City  
GREEN BAY

State  
WI

Zip Code  
54311

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16758

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDEMANN, KEN, , MR.,**

Mailing Address 1660 HOFFMAN RD APT 335

City  
GREEN BAY

State  
WI

Zip Code  
54311

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.18535

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOHRY, RAUN, , ,**

Mailing Address 6 SPANISH BAY

City  
N SIOUX CITY

State  
SD

Zip Code  
57049

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18310

Amount of Each Receipt this Period

300.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

380.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MADLEY, HENRY, , MR.,

Mailing Address 3648 62ND AVE E  
 BRADENTON

City  
 BRADENTON

State  
 FL

Zip Code  
 34203

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11AI.16763

Amount of Each Receipt this Period

780.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MADLEY, HENRY, , MR.,

Mailing Address 3648 62ND AVE E  
 BRADENTON

City  
 BRADENTON

State  
 FL

Zip Code  
 34203

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Transaction ID : SA11AI.18314

Amount of Each Receipt this Period

140.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANTEUFFEL, ALLAN, , MR.,

Mailing Address 1440 CHAMPION FOREST CT

City  
 WHEATON

State  
 IL

Zip Code  
 60187

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 INFORMATION REQUESTED

Occupation (for Individual)  
 INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2016

Transaction ID : SA11AI.18316

Amount of Each Receipt this Period

800.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1720.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARRIE, PAULA, , ,

Mailing Address 4639 SHULL RD

City  
GAHANNAState  
OHZip Code  
43230FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18318

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARSHALL, HELEN, L., MRS.,

Mailing Address 827 SUSAN AVE  
WOODSTOCKCity  
WOODSTOCKState  
VAZip Code  
22664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.16991

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASTROIANNI, NICHOLAS, , MR.,

Mailing Address 33 WALNUT ST

City  
MILFORDState  
MAZip Code  
01757FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17127

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

340.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MATTHEWS, JOHN, , MR.,

Mailing Address PO BOX 761384

City  
SAN ANTONIO

State  
TX

Zip Code  
78245

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2016

Transaction ID : SA11AI.16285

Amount of Each Receipt this Period

1200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATTHEWS, JOHN, , MR.,

Mailing Address PO BOX 761384

City  
SAN ANTONIO

State  
TX

Zip Code  
78245

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2016

Transaction ID : SA11AI.16993

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGEE, ED, , MR.,

Mailing Address PO BOX 476

City  
FLINT

State  
TX

Zip Code  
75762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2016

Transaction ID : SA11AI.17128

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1580.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGIRR, ELIZABETH, M., ,

Mailing Address 218 N NEW ST

City  
STAUNTON

State  
VA

Zip Code  
24401

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18326

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCMILLAN, JAMES, , MRS.,

Mailing Address 15 CRYSTAL CANYON PL  
SPRING

City  
SPRING

State  
TX

Zip Code  
77389

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHENIERE

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18328

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MELENDEZ, JOHN, , ,

Mailing Address 26 SCHREMPP LN

City  
PINE BUSH

State  
NY

Zip Code  
12566

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US MILITARY ACADEMY

Occupation (for Individual)  
EDUCATION TECHNOLOGY MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17760

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-GARRETT-TRANS20161026

SUBTOTAL of Receipts This Page (optional)..... ►

270.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MELENDEZ, JOHN, , ,

Mailing Address 26 SCHREMPP LN

City  
PINE BUSH

State  
NY

Zip Code  
12566

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US MILITARY ACADEMY

Occupation (for Individual)  
EDUCATION TECHNOLOGY MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17698

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MELLO, GARY, J., MR.,

Mailing Address 3224 OMEGA CIR  
PLEASANTON

City  
PLEASANTON

State  
CA

Zip Code  
94588

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.16997

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, MICHAEL, , ,

Mailing Address 4402 BOXWOOD RD

City  
BETHESDA

State  
MD

Zip Code  
20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16289

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

590.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MISIUKOWIEC, LEONIDA, , ,**

Mailing Address 40 BARNESON AVE APT A

City  
SAN MATEO

State  
CA

Zip Code  
94402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17131

Amount of Each Receipt this Period

320.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONSUR, RANDY, , MR.,**

Mailing Address PO BOX 1749  
ALEXANDRIA

City  
ALEXANDRIA

State  
LA

Zip Code  
71309

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16771

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOSTERO, RONALD, , MR.,**

Mailing Address 505 CHISWICK RD

City  
PALOS VERDES ESTATES

State  
CA

Zip Code  
90274

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.18343

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

870.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUHASKY, RONALD, J., MR.,**

Mailing Address 1905 W SCHOOLHOUSE ST

City  
HAYSVILLE

State  
KS

Zip Code  
67060

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : SA11AI.18548

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MYERS, CHELI, D., MS.,**

Mailing Address 3530 PINEHURST CIRCLE

City

FARMERS BRANCH

State

TX

Zip Code

75234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2451.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16300

Amount of Each Receipt this Period

1194.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NAKAO, CONSTANCE, , ,**

Mailing Address 1600 2ND ST

City

KIRKLAND

State

WA

Zip Code

98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18351

Amount of Each Receipt this Period

80.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1474.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NELSON, DONALD, H., MR.,**

Mailing Address PO BOX 401458

City  
HESPERIA

State  
CA

Zip Code  
92340

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18354

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NESTLER, MIRIAM, , ,**

Mailing Address 6701 SW SCATHELOCK RD

City  
TOPEKA

State  
KS

Zip Code  
66614

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.18552

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSEN, JOHNS, O., MR.,**

Mailing Address 4645 STONEHAVEN DR  
COLUMBUS

City  
COLUMBUS

State  
OH

Zip Code  
43220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17133

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1460.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLSEN, JOHNS, O., MR.,

Mailing Address 4645 STONEHAVEN DR  
 COLUMBUS

City  
 COLUMBUS

State  
 OH

Zip Code  
 43220

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Transaction ID : SA11Al.18363

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PATRICK, TIM, , ,

Mailing Address 5839 STATE ROUTE 5

City  
 RAVENNA

State  
 OH

Zip Code  
 44266

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 LININGS INC.

Occupation (for Individual)  
 PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11Al.16780

Amount of Each Receipt this Period

800.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEDERSON, IRENE, , MS.,

Mailing Address 200 SUNNYSIDE AVE  
 PLENTYWOOD

City  
 PLENTYWOOD

State  
 MT

Zip Code  
 59254

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2016

Transaction ID : SA11Al.16304

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1400.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEDERSON, IRENE, , MS.,

Mailing Address 200 SUNNYSIDE AVE  
 PLENTYWOOD

City  
 PLENTYWOOD

State  
 MT

Zip Code  
 59254

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1770.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Transaction ID : SA11AI.18370

Amount of Each Receipt this Period

320.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PELAGATTI, JAMES, , MR.,

Mailing Address 29 GORDON RD  
 NORTH READING

City  
 NORTH READING

State  
 MA

Zip Code  
 01864

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 INFORMATION REQUESTED

Occupation (for Individual)  
 SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2016

Transaction ID : SA11AI.16305

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEMBERTON, DONALD, , MR.,

Mailing Address 2950 AVENUE S

City  
 BROOKLYN

State  
 NY

Zip Code  
 11229

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 INFORMATION REQUESTED

Occupation (for Individual)  
 INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2016

Transaction ID : SA11AI.16662

Amount of Each Receipt this Period

240.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

710.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 94 OF 208  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERKINS, EDWARD, , ,**

Mailing Address 4486 N. WHITE HAWK DR

City  
APPLETONState  
WIZip Code  
54913FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2016

Transaction ID : SA11AI.16628

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETTIT, JUDY, , ,**

Mailing Address 5118 GLEN VIEW PL

City  
BONITAState  
CAZip Code  
91902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	26	2016

Transaction ID : SA11AI.16629

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PEYTON, WILLIAM, , ,**Mailing Address 9228 E STATE ROAD 42  
RAGOCity  
RAGOState  
KSZip Code  
67142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	01	2016

Transaction ID : SA11AI.18371

Amount of Each Receipt this Period

80.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

260.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PFEIFFER, PATRICIA, , MS.,**

Mailing Address PO BOX 601

City  
LADY LAKE

State  
FL

Zip Code  
32158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16308

Amount of Each Receipt this Period

240.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PFLANTZ, WARREN, W., ,**

Mailing Address 1222 TELEGRAPH RD

City  
ARNOLD

State  
MO

Zip Code  
63010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DES PERES HOSPITAL

Occupation (for Individual)  
GROUNSKOEPEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18372

Amount of Each Receipt this Period

240.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PROTHRO, ANN, , ,**

Mailing Address 820 COVINGTON ST  
BOWLING GREEN

City  
BOWLING GREEN

State  
KY

Zip Code  
42103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 06 / 2016

Transaction ID : SA11AI.18604

Amount of Each Receipt this Period

160.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

640.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PRYOR, BRIAN, , ,

Mailing Address 53 WESTFIELD DR.

City  
CENTERPORT

State  
NY

Zip Code  
11721

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11Al.18107

Amount of Each Receipt this Period

40.00

☐ Memo Item

EM-GARRETT-TRANS20161108

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIES, MELVIN, A., ,

Mailing Address 3585 ROUND BARN BLVD APT 329

City  
SANTA ROSA

State  
CA

Zip Code  
95403

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11Al.18386

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RINDLAUB, SARAH, , ,

Mailing Address 8441 SE 68TH ST. #217

City  
MERCER ISLAND

State  
WA

Zip Code  
98040

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

12225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11Al.16314

Amount of Each Receipt this Period

975.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1065.00

TOTAL This Period (last page this line number only).....▶



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RITCH, PHILIP, E., MR.,

Mailing Address 146 KALUAMOO ST

City  
KAILUAState  
HIZip Code  
96734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18389

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBERTS, COURTNEY, , MR.,

Mailing Address 5433 GUILDBROOK RD

City  
CHARLOTTEState  
NCZip Code  
28226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18391

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSE, GENE, , ,

Mailing Address 5902 BIGHORN DR

City  
ROANOKEState  
VAZip Code  
24018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2016

Transaction ID : SA11AI.16340

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

380.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 98 OF 208  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUTHERFORD, MILES, , ,**

Mailing Address 807 PRESLEY WAY

City  
SUGAR LANDState  
TXZip Code  
77479FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11Al.17753

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUTHERFORD, MILES, , ,**

Mailing Address 807 PRESLEY WAY

City  
SUGAR LANDState  
TXZip Code  
77479FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11Al.17722

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUTHERFORD, MILES, , ,**

Mailing Address 807 PRESLEY WAY

City  
SUGAR LANDState  
TXZip Code  
77479FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11Al.17691

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-GOSAR-TRANS20161031

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUTHERFORD, MILES, , ,**

Mailing Address 807 PRESLEY WAY

City  
SUGAR LAND

State  
TX

Zip Code  
77479

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17660

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUTHERFORD, MILES, , ,**

Mailing Address 807 PRESLEY WAY

City  
SUGAR LAND

State  
TX

Zip Code  
77479

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17815

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUTHERFORD, MILES, , ,**

Mailing Address 807 PRESLEY WAY

City  
SUGAR LAND

State  
TX

Zip Code  
77479

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17784

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BUDD-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RUTHERFORD, MILES, , ,**

Mailing Address 807 PRESLEY WAY

City  
SUGAR LAND

State  
TX

Zip Code  
77479

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17629

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BANKS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUTHERFORD, MILES, , ,**

Mailing Address 807 PRESLEY WAY

City  
SUGAR LAND

State  
TX

Zip Code  
77479

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.16575

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHEEL, ROBERT, A., MR.,**

Mailing Address 1200 HARWOOD DR S APT 172

City  
FARGO

State  
ND

Zip Code  
58104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.18574

Amount of Each Receipt this Period

800.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

840.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SENCEBAUGH, LEE, , MR.,**

Mailing Address PO BOX 1205

City  
LOS BANOS

State  
CA

Zip Code  
93635

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17064

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHAFFER, GARY, W., MR.,**

Mailing Address 216 W COURT ST APT 47

City  
WOODLAND

State  
CA

Zip Code  
95695

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WOODLAND DEVELOPEMENT CO

Occupation (for Individual)  
REAL ESTATE MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17135

Amount of Each Receipt this Period

240.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHORT, CATHERINE, M., MRS.,**

Mailing Address 2967 S ATLANTIC AVE APT 1107

City  
DAYTONA BEACH

State  
FL

Zip Code  
32118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18411

Amount of Each Receipt this Period

80.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

480.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLUHAN, WILLIAM, , ,**

Mailing Address 19337 TONTOGANY CREEK RD

City

BOWLING GREEN

State

OH

Zip Code

43402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 01 / 2016

Transaction ID : SA11AI.18416

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SONIN, NINA, , ,**

Mailing Address 3131 MENLO DR

City

GLENDALE

State

CA

Zip Code

91208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

10 / 28 / 2016

Transaction ID : SA11AI.17076

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINKAMP, JEFFREY, , MR.,**

Mailing Address PO BOX 98

ROCHESTER

City

ROCHESTER

State

VT

Zip Code

05767

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

11 / 01 / 2016

Transaction ID : SA11AI.18422

Amount of Each Receipt this Period

200.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

430.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, DEBORAH, , ,**

Mailing Address 1094 HIGH COUNTRY RD

City  
TOWSON

State  
MD

Zip Code  
21286

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BCPS IN MD

Occupation (for Individual)  
SUBSTITUTE TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18426

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUNGAILA, RICHARD, , ,**

Mailing Address 1827 PORT STANHOPE PL

City

NEWPORT BEACH

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16813

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TEEGARDIN, GARY, , ,**

Mailing Address 2323 BRENT DR

City

DODGE CITY

State

KS

Zip Code

67801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : SA11AI.18094

Amount of Each Receipt this Period

16.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

156.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TEEGARDIN, GARY, , ,**

Mailing Address 2323 BRENT DR

City  
DODGE CITY

State  
KS

Zip Code  
67801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : SA11AI.18097

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TEEGARDIN, GARY, , ,**

Mailing Address 2323 BRENT DR

City  
DODGE CITY

State  
KS

Zip Code  
67801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 05 / 2016

Transaction ID : SA11AI.18100

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TEEGARDIN, GARY, , ,**

Mailing Address 2323 BRENT DR

City  
DODGE CITY

State  
KS

Zip Code  
67801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2016

Transaction ID : SA11AI.18605

Amount of Each Receipt this Period

16.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

48.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMAS, ALLAN, , ,

Mailing Address 8023 PETRA DR

City  
HOUSTON

State  
TX

Zip Code  
77083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17816

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, ALLAN, , ,

Mailing Address 8023 PETRA DR

City  
HOUSTON

State  
TX

Zip Code  
77083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17785

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BUDD-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, ALLAN, , ,

Mailing Address 8023 PETRA DR

City  
HOUSTON

State  
TX

Zip Code  
77083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

90.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17630

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BANKS-TRANS20161031

SUBTOTAL of Receipts This Page (optional).....▶

30.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 OF 208  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, ALLAN, , ,**

Mailing Address 8023 PETRA DR

City  
HOUSTON

State  
TX

Zip Code  
77083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.16576

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, ALLAN, , ,**

Mailing Address 8023 PETRA DR

City  
HOUSTON

State  
TX

Zip Code  
77083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

130.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17754

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMAS, ALLAN, , ,**

Mailing Address 8023 PETRA DR

City  
HOUSTON

State  
TX

Zip Code  
77083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17723

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BLUM-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, ALLAN, , ,**

Mailing Address 8023 PETRA DR

City  
HOUSTON

State  
TX

Zip Code  
77083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17692

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, ALLAN, , ,**

Mailing Address 8023 PETRA DR

City  
HOUSTON

State  
TX

Zip Code  
77083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17661

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, JAY, , ,**

Mailing Address PO BOX 844

City  
NAMPA

State  
ID

Zip Code  
83653

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

19.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16473

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-JOHNSON-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

26.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 108 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, JAY, , ,**

Mailing Address PO BOX 844

City  
NAMPA

State  
ID

Zip Code  
83653

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16509

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, JAY, , ,**

Mailing Address PO BOX 844

City  
NAMPA

State  
ID

Zip Code  
83653

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16467

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-BANKS-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, JAY, , ,**

Mailing Address PO BOX 844

City  
NAMPA

State  
ID

Zip Code  
83653

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

32.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16488

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-BLUM-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

18.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, JAY, , ,**

Mailing Address PO BOX 844

City  
NAMPA

State  
ID

Zip Code  
83653

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16502

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-BUDD-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, JAY, , ,**

Mailing Address PO BOX 844

City  
NAMPA

State  
ID

Zip Code  
83653

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16204

Amount of Each Receipt this Period

7.00

☐ Memo Item

EM-BIGGS-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, JAY, , ,**

Mailing Address PO BOX 844

City  
NAMPA

State  
ID

Zip Code  
83653

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

26.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16481

Amount of Each Receipt this Period

7.00

☐ Memo Item

EM-GOSAR-TRANS20161026

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

20.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 110 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, JAY, , ,**

Mailing Address PO BOX 844

City  
NAMPA

State  
ID

Zip Code  
83653

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16495

Amount of Each Receipt this Period

6.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRIEM, SWANETTE, , ,**

Mailing Address PO BOX 737

City

EVANSTON

State

IL

Zip Code

60204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18439

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. URBINA, ALBERT, G., MR.,**

Mailing Address 17238 BOCA CLUB BLVD

City

BOCA RATON

State

FL

Zip Code

33487

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : SA11AI.18588

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

266.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 111 OF 208

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UTTERBACK, DANNY, , ,**

Mailing Address 2301 BROOKWOOD DR

City  
DOTHANState  
ALZip Code  
36301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11Al.17819

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UTTERBACK, DANNY, , ,**

Mailing Address 2301 BROOKWOOD DR

City  
DOTHANState  
ALZip Code  
36301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11Al.17788

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BUDD-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UTTERBACK, DANNY, , ,**

Mailing Address 2301 BROOKWOOD DR

City  
DOTHANState  
ALZip Code  
36301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11Al.17633

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BANKS-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 112 OF 208

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UTTERBACK, DANNY, , ,**

Mailing Address 2301 BROOKWOOD DR

City  
DOTHANState  
ALZip Code  
36301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11Al.16633

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UTTERBACK, DANNY, , ,**

Mailing Address 2301 BROOKWOOD DR

City  
DOTHANState  
ALZip Code  
36301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11Al.16579

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UTTERBACK, DANNY, , ,**

Mailing Address 2301 BROOKWOOD DR

City  
DOTHANState  
ALZip Code  
36301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11Al.17757

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-GARRETT-TRANS20161026

SUBTOTAL of Receipts This Page (optional)..... ▶

60.00

TOTAL This Period (last page this line number only)..... ▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. UTTERBACK, DANNY, , ,

Mailing Address 2301 BROOKWOOD DR

City  
DOTHANState  
ALZip Code  
36301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11AL17726

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. UTTERBACK, DANNY, , ,

Mailing Address 2301 BROOKWOOD DR

City  
DOTHANState  
ALZip Code  
36301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11AL17695

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. UTTERBACK, DANNY, , ,

Mailing Address 2301 BROOKWOOD DR

City  
DOTHANState  
ALZip Code  
36301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 26 / 2016

Transaction ID : SA11AL17664

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAN DEVENTER, JON, N., MR.,

Mailing Address PO BOX 3025

City  
CONROE

State  
TX

Zip Code  
77305

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18442

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WAECHTER, JOHN, , ,

Mailing Address 2332 OAK RIDGE DRIVE

City  
TROY

State  
MI

Zip Code  
48098

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.17095

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WAGGONER, PAUL, M., ,

Mailing Address 600 E 73RD AVE  
HUTCHINSON

City  
HUTCHINSON

State  
KS

Zip Code  
67502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18446

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

210.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 115 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAGNER, CAMILLE, P., ,**

Mailing Address 6004 GLEN HILL RD

City  
LOUISVILLE

State  
KY

Zip Code  
40222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11Al.18447

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALSH, DANIEL, , ,**

Mailing Address 4 N 32ND AVE

City  
LONGPORT

State  
NJ

Zip Code  
08403

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATLANTIC COUNTY, NJ

Occupation (for Individual)  
PROJECT COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 23 / 2016

Transaction ID : SA11Al.16602

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALSH, DANIEL, , ,**

Mailing Address 4 N 32ND AVE

City  
LONGPORT

State  
NJ

Zip Code  
08403

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATLANTIC COUNTY, NJ

Occupation (for Individual)  
PROJECT COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : SA11Al.16651

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALSH, DANIEL, , ,

Mailing Address 4 N 32ND AVE

City  
LONGPORTState  
NJZip Code  
08403FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATLANTIC COUNTY, NJOccupation (for Individual)  
PROJECT COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : SA11AI.18098

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEATHERELL, LINDA, , DR.,

Mailing Address 2159 COLVIN RD  
CHESTERCity  
CHESTERState  
SCZip Code  
29706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2016

Transaction ID : SA11AI.16326

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHETSTONE, EARL, , MR.,

Mailing Address 9624 CROSBY DR

City  
PLEASANTONState  
CAZip Code  
94588FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18466

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

530.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 117 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMSON, GREG, , ,**

Mailing Address 1116 SPRING VALLEY LN NE

City  
ATLANTA

State  
GA

Zip Code  
30306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16635

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINTER, DONALD, E., MR.,**

Mailing Address 7712 APPLE MILL PL

City  
LOUISVILLE

State  
KY

Zip Code  
40228

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

Transaction ID : SA11AI.16833

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WONG, JON, , ,**

Mailing Address 3628 KINGS WAY  
APT 2

City  
SACRAMENTO

State  
CA

Zip Code  
95821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17653

Amount of Each Receipt this Period

1.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1201.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 118 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WONG, JON, , ,**

Mailing Address 3628 KINGS WAY  
APT 2

City  
SACRAMENTO

State  
CA

Zip Code  
95821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17808

Amount of Each Receipt this Period

1.00

☐ Memo Item

EM-DAVIDSON-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WONG, JON, , ,**

Mailing Address 3628 KINGS WAY  
APT 2

City  
SACRAMENTO

State  
CA

Zip Code  
95821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17777

Amount of Each Receipt this Period

1.00

☐ Memo Item

EM-BUDD-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WONG, JON, , ,**

Mailing Address 3628 KINGS WAY  
APT 2

City  
SACRAMENTO

State  
CA

Zip Code  
95821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17622

Amount of Each Receipt this Period

1.00

☐ Memo Item

EM-BANKS-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 119 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WONG, JON, , ,**

Mailing Address 3628 KINGS WAY  
APT 2

City  
SACRAMENTO

State  
CA

Zip Code  
95821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.16568

Amount of Each Receipt this Period

1.00

☐ Memo Item

EM-BIGGS-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WONG, JON, , ,**

Mailing Address 3628 KINGS WAY  
APT 2

City  
SACRAMENTO

State  
CA

Zip Code  
95821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17746

Amount of Each Receipt this Period

1.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WONG, JON, , ,**

Mailing Address 3628 KINGS WAY  
APT 2

City  
SACRAMENTO

State  
CA

Zip Code  
95821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

Transaction ID : SA11AI.17715

Amount of Each Receipt this Period

1.00

☐ Memo Item

EM-BLUM-TRANS20161031

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 120 OF 208

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WONG, JON, , ,**Mailing Address 3628 KINGS WAY  
APT 2City  
SACRAMENTOState  
CAZip Code  
95821FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	25	2016

Transaction ID : SA11AI.17684

Amount of Each Receipt this Period

1.00

☐ Memo Item

EM-GOSAR-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZAZULAK, PAULINE, , ,**

Mailing Address 3861 PARK BLVD

City  
OAKLANDState  
CAZip Code  
94602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
SMALL APPARTMENT RENTAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	28	2016

Transaction ID : SA11AI.17114

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZINK, BARBARA, A, MRS.,**

Mailing Address PO BOX 1676

City  
VISTAState  
CAZip Code  
92085FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	28	2016

Transaction ID : SA11AI.17117

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

276.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 OF 208

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZINK, BARBARA, A, MRS.,

Mailing Address PO BOX 1676

City  
VISTAState  
CAZip Code  
92085FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : SA11AI.18479

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZULUETA, LAURA, J., ,

Mailing Address 2008 GREYHAWK PL

City  
APEXState  
NCZip Code  
27539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17729

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BLUM-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZULUETA, LAURA, J., ,

Mailing Address 2008 GREYHAWK PL

City  
APEXState  
NCZip Code  
27539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

18650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17667

Amount of Each Receipt this Period

100.00

☐ Memo Item

EM-JOHNSON-TRANS20161031

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 OF 208

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZULUETA, LAURA, J., ,**

Mailing Address 2008 GREYHAWK PL

City  
APEX

State  
NC

Zip Code  
27539

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17761

Amount of Each Receipt this Period

100.00

☐ Memo Item

EM-GARRETT-TRANS20161026

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZULUETA, LAURA, J., ,**

Mailing Address 2008 GREYHAWK PL

City  
APEX

State  
NC

Zip Code  
27539

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.17791

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BUDD-TRANS20161031

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

73918.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 208

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	-----------------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

HOUSE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREAT AMERICA PAC**

Mailing Address 107 S WEST ST  
STE 555

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

FEC ID number of contributing  
federal political committee.

C C00608489

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2016

Transaction ID : SA11C.18652

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

5000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 208  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BIGGS FOR CONGRESS**

Mailing Address 228 S WASHINGTON ST  
STE 115

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

FEC ID number of contributing  
federal political committee.

**C**

C00610451

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1042.40

Date of Receipt

**11** / **21** / **2016**

**Transaction ID : SA17.18655**

Amount of Each Receipt this Period

44.35

☐ Memo Item

PAC FUNDRAISING SERVICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City

FAIRFIELD

State

OH

Zip Code

45014

FEC ID number of contributing  
federal political committee.

**C**

C00600718

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8294.40

Date of Receipt

**11** / **02** / **2016**

**Transaction ID : SA17.18654**

Amount of Each Receipt this Period

957.70

☐ Memo Item

PAC FUNDRAISING SERVICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. JIM BANKS FOR CONGRESS, INC.**

Mailing Address P.O. BOX 11431

City

FORT WAYNE

State

IN

Zip Code

46858

FEC ID number of contributing  
federal political committee.

**C**

C00577999

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3558.75

Date of Receipt

**10** / **24** / **2016**

**Transaction ID : SA17.18653**

Amount of Each Receipt this Period

1103.90

☐ Memo Item

PAC FUNDRAISING SERVICES

**SUBTOTAL** of Receipts This Page (optional)..... ►

2105.95

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 OF 208

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MIKE JOHNSON FOR LOUISIANA**

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206

City  
METAIRIE

State  
LA

Zip Code  
70006

FEC ID number of contributing  
federal political committee.

C

C00608695

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3155.80

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 21 / 2016

Transaction ID : SA17.18657

Amount of Each Receipt this Period

1783.05

☐ Memo Item

PAC FUNDRAISING SERVICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City

NEWTON

State

NJ

Zip Code

07860

FEC ID number of contributing  
federal political committee.

C

C00386110

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2783.20

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 17 / 2016

Transaction ID : SA17.18662

Amount of Each Receipt this Period

519.30

☐ Memo Item

PAC FUNDRAISING SERVICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City

ADVANCE

State

NC

Zip Code

27006

FEC ID number of contributing  
federal political committee.

C

C00614776

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1441.50

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 21 / 2016

Transaction ID : SA17.18656

Amount of Each Receipt this Period

50.30

☐ Memo Item

PAC FUNDRAISING SERVICES

**SUBTOTAL** of Receipts This Page (optional)..... ►

2352.65

**TOTAL** This Period (last page this line number only)..... ►

4458.60

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 126 OF 208

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. AMERICAN CAGING, INC.**Mailing Address 4850 WRIGHT RD  
STE 168City  
STAFFORDState  
TXZip Code  
77477Purpose of Disbursement  
PAC CAGING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16151

Amount of Each Disbursement this Period

329.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN CAGING, INC.**Mailing Address 4850 WRIGHT RD  
STE 168City  
STAFFORDState  
TXZip Code  
77477Purpose of Disbursement  
PAC CAGING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16175

Amount of Each Disbursement this Period

831.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address 50TH, 200 VESEY ST

City  
NEW YORKState  
NYZip Code  
10285Purpose of Disbursement  
PAC FAX SERVICES - NO ITEMIZATION

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16152

Amount of Each Disbursement this Period

16.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1	1	7	7	6
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 127 OF 208

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 50TH, 200 VESEY ST

City  
NEW YORKState  
NYZip Code  
10285Purpose of Disbursement  
SEE MEMO ENTRIES

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16176

Amount of Each Disbursement this Period

25.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CLOUDFLARE**

Mailing Address 101 TOWNSEND ST

City  
SAN FRANCISCOState  
CAZip Code  
94107Purpose of Disbursement  
PAC ONLINE SERVICE

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16177

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
PAC ONLINE SERVICE

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16178

Amount of Each Disbursement this Period

5.81

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.81

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 128 OF 208

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 50TH, 200 VESEY ST

City  
NEW YORKState  
NYZip Code  
10285Purpose of Disbursement  
SEE MEMO ENTRIES

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

FEC Identification Number

C

Transaction ID : SB21B.16145

Amount of Each Disbursement this Period

66.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City  
MEMPHISState  
TNZip Code  
38119Purpose of Disbursement  
PAC SHIPPING

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

FEC Identification Number

C

Transaction ID : SB21B.16146

Amount of Each Disbursement this Period

20.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
PAC ONLINE SERVICE

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

FEC Identification Number

C

Transaction ID : SB21B.16147

Amount of Each Disbursement this Period

30.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

66.69



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 129 OF 208

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 50TH, 200 VESEY ST

City  
NEW YORKState  
NYZip Code  
10285Purpose of Disbursement  
PAC EMAIL MANAGEMENT - NO ITEMIZATION

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			15			2016					

FEC Identification Number

C Transaction ID : SB21B.16179

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address 50TH, 200 VESEY ST

City  
NEW YORKState  
NYZip Code  
10285Purpose of Disbursement  
PAC FAX SERVICE - NO ITEMIZATION

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			22			2016					

FEC Identification Number

C Transaction ID : SB21B.16180

Amount of Each Disbursement this Period

16.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOLD COLORS CONSULTING, LLC**Mailing Address 3125 TIGER RUN COURT  
STE 111City  
CARLSBADState  
CAZip Code  
92010Purpose of Disbursement  
PAC FUNDRAISING SERVICES

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			02			2016					

FEC Identification Number

C Transaction ID : SB21B.16182

Amount of Each Disbursement this Period

5079.40

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5111.35

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 130 OF 208

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. CAPITAL ONE**

Mailing Address 1680 CAPITAL ONE TOWER DR

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
PAC BANK FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16150

Amount of Each Disbursement this Period

70.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL ONE**

Mailing Address 1680 CAPITAL ONE TOWER DR

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
PAC BANK FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16173

Amount of Each Disbursement this Period

243.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITAL ONE**

Mailing Address 1680 CAPITAL ONE TOWER DR

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
PAC BANK FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16196

Amount of Each Disbursement this Period

23.79

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

337.93

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 131 OF 208

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. CAPITAL ONE**

Mailing Address 1680 CAPITAL ONE TOWER DR

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
PAC BANK FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	2	2		2	0	1	6	6	6

FEC Identification Number

C

Transaction ID : SB21B.18667

Amount of Each Disbursement this Period

141.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELECTEK USA**

Mailing Address PO BOX 23715

City  
CHAGRIN FALLSState  
OHZip Code  
44023Purpose of Disbursement  
PAC SOFTWARE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	2	2		2	0	1	6	6	6

FEC Identification Number

C

Transaction ID : SB21B.16197

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES**Mailing Address 824 S. MILLEDGE AVE  
STE 101City  
ATHENSState  
GAZip Code  
30605Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0	0		2	1	1		2	0	1	6	6	6

FEC Identification Number

C

Transaction ID : SB21B.16153

Amount of Each Disbursement this Period

3011.59

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3652.94

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 132 OF 208

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2016

Mailing Address 824 S. MILLEDGE AVE  
STE 101City  
ATHENSState  
GAZip Code  
30605Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.16183

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Mailing Address 3180 18TH ST.

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.16172

Amount of Each Disbursement this Period

557.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Mailing Address 3180 18TH ST.

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.16198

Amount of Each Disbursement this Period

72.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3629.33

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 133 OF 208

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH ST.

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16200

Amount of Each Disbursement this Period

23.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SUNTRUST BANK**

Mailing Address PO BOX 4418

City  
ATLANTAState  
GAZip Code  
30302Purpose of Disbursement  
PAC BANK FEES

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16149

Amount of Each Disbursement this Period

134.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SUNTRUST BANK**

Mailing Address PO BOX 4418

City  
ATLANTAState  
GAZip Code  
30302Purpose of Disbursement  
PAC BANK FEES

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16174

Amount of Each Disbursement this Period

130.50

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

288.17

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 208

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City  
WASHINGTONState  
DCZip Code  
20260Purpose of Disbursement  
PAC POSTAGE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16171

Amount of Each Disbursement this Period

86.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City  
WASHINGTONState  
DCZip Code  
20260Purpose of Disbursement  
PAC POSTAGE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16195

Amount of Each Disbursement this Period

96.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ZEALOUS, LLC**Mailing Address 110 N MILAM  
#177City  
FREDERICKSBURGState  
TXZip Code  
78624Purpose of Disbursement  
PAC DIGITAL CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.16181

Amount of Each Disbursement this Period

2636.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2818.94

**TOTAL** This Period (last page this line number only).....▶

17108.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 135 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.16157**

Amount of Each Disbursement this Period

58.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY GREG GILL ID# 8650

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.16512**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY RAYMOND GREEN ID# 8651

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.16513**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

58.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 136 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY JOHN KOTCIAN ID# 8652

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒

House

☐ Senate☐ President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C C00610451

**Transaction ID : SB23.16514**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY JAY THOMPSON ID# 8653

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒

House

☐ Senate☐ President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C C00610451

**Transaction ID : SB23.16515**

Amount of Each Disbursement this Period

7.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒

House

☐ Senate☐ President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				31				2016					

FEC Identification Number

C C00610451

**Transaction ID : SB23.16158**

Amount of Each Disbursement this Period

449.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

449.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 137 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY ANDREW HAZI ID# 8736

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

FEC Identification Number

C C00610451

**Transaction ID : SB23.17841**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY WILLIAM KELLENBERGER ID# 7028

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

FEC Identification Number

C C00610451

**Transaction ID : SB23.17842**

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY DENNIS DUNN ID# 8745

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

FEC Identification Number

C C00610451

**Transaction ID : SB23.17855**

Amount of Each Disbursement this Period

200.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 139 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY CAROL JACK ID# 8739

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2016					

FEC Identification Number

C C00610451

**Transaction ID : SB23.17845**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY MILES RUTHERFORD ID# 5257

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2016					

FEC Identification Number

C C00610451

**Transaction ID : SB23.17846**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY ALLAN THOMAS ID# 7386

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2016					

FEC Identification Number

C C00610451

**Transaction ID : SB23.17847**

Amount of Each Disbursement this Period

10.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 140 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY HAROLD BLOOM ID# 8740

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.17848**

Amount of Each Disbursement this Period

3.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY STEPHANIE HOPPING ID# 8741

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.17849**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY DANNY UTTERBACK ID# 8418

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.17850**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 141 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY KEVIN DANIEL ID# 8125

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				27				2016					

FEC Identification Number

C C00610451

**Transaction ID : SB23.17840**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY FRANCO GALLO ID# 8742

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				27				2016					

FEC Identification Number

C C00610451

**Transaction ID : SB23.17851**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY JAMES KAMPFER ID# 8743

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				27				2016					

FEC Identification Number

C C00610451

**Transaction ID : SB23.17852**

Amount of Each Disbursement this Period

5.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 142 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY MARK DEHLIN ID# 5319

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.17853**

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY DENNIS BINKLEY ID# 8744

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.17854**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	8			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.16186**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

25.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 143 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BIGGS FOR CONGRESS**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
EARMARKED BY LEO FLORES ID# 9200

001

Category/  
Type

Candidate Name

**BIGGS, ANDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	3			2	0	1	6		

FEC Identification Number

C C00610451

**Transaction ID : SB23.18112**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00543926

**Transaction ID : SB23.16159**

Amount of Each Disbursement this Period

82.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY GREG GILL ID# 8650

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00543926

**Transaction ID : SB23.16540**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

82.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 144 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY RAYMOND GREEN ID# 8651

001

Candidate Name

**BLUM, RODNEY, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C C00543926

**Transaction ID : SB23.16541**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY R.E. HOLMER ID# 8731

001

Candidate Name

**BLUM, RODNEY, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C C00543926

**Transaction ID : SB23.16542**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY JOHN KOTCIAN ID# 8652

001

Candidate Name

**BLUM, RODNEY, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C C00543926

**Transaction ID : SB23.16543**

Amount of Each Disbursement this Period

6.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 145 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY JAY THOMPSON ID# 8653

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00543926

**Transaction ID : SB23.16544**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

State: IA District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	6		

FEC Identification Number

C C00543926

**Transaction ID : SB23.16160**

Amount of Each Disbursement this Period

499.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY ANDREW HAZI ID# 8736

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	6		

FEC Identification Number

C C00543926

**Transaction ID : SB23.17965**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 146 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY WILLIAM KELLENBERGER ID# 7028

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17966**

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY DENNIS DUNN ID# 8745

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17980**

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY JON WONG ID# 5323

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17963**

Amount of Each Disbursement this Period

1.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 147 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY JUDITH BINDER ID# 8737

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17967**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY RICHARD GOSSELIN ID# 8738

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17968**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY CAROL JACK ID# 8739

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17969**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 148 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY MILES RUTHERFORD ID# 5257

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2016					

FEC Identification Number

**C** C00543926**Transaction ID : SB23.17970**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY ALLAN THOMAS ID# 7386

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2016					

FEC Identification Number

**C** C00543926**Transaction ID : SB23.17971**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY HAROLD BLOOM ID# 8740

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2016					

FEC Identification Number

**C** C00543926**Transaction ID : SB23.17972**

Amount of Each Disbursement this Period

3.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 149 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY STEPHANIE HOPPING ID# 8741

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17973**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY DANNY UTTERBACK ID# 8418

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17974**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY KEVIN DANIEL ID# 8125

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17964**

Amount of Each Disbursement this Period

5.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 150 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY FRANCO GALLO ID# 8742

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17975**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY JAMES KAMPFER ID# 8743

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17976**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY LAURA ZULUETA ID# 5149

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C C00543926

**Transaction ID : SB23.17977**

Amount of Each Disbursement this Period

50.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 151 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY MARK DEHLIN ID# 5319

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C C00543926

**Transaction ID : SB23.17978**

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY DENNIS BINKLEY ID# 8744

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	6		

FEC Identification Number

C C00543926

**Transaction ID : SB23.17979**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	8			2	0	1	6		

FEC Identification Number

C C00543926

**Transaction ID : SB23.16187**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

25.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 152 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City  
DUBUQUEState  
IAZip Code  
52001Purpose of Disbursement  
EARMARKED BY LEO FLORES ID# 9200

001

Category/  
Type

Candidate Name

**BLUM, RODNEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	3			2	0	1	6		

FEC Identification Number

**C** C00543926**Transaction ID : SB23.18116**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

**C** C00600718**Transaction ID : SB23.16163**

Amount of Each Disbursement this Period

82.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY GREG GILL ID# 8650

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

**C** C00600718**Transaction ID : SB23.16561**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

82.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 153 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY RAYMOND GREEN ID# 8651

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C C00600718

**Transaction ID : SB23.16562**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY R.E. HOLMER ID# 8731

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C C00600718

**Transaction ID : SB23.16563**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY JOHN KOTCIAN ID# 8652

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C C00600718

**Transaction ID : SB23.16564**

Amount of Each Disbursement this Period

6.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 154 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY JAY THOMPSON ID# 8653

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.16565**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.16164**

Amount of Each Disbursement this Period

449.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY ANDREW HAZI ID# 8736

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.18058**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

449.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 155 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY WILLIAM KELLENBERGER ID# 7028

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.18059**

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY DENNIS DUNN ID# 8745

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.18072**

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY JON WONG ID# 5323

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.18056**

Amount of Each Disbursement this Period

1.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 156 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY JUDITH BINDER ID# 8737

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00600718

**Transaction ID : SB23.18060**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY RICHARD GOSSELIN ID# 8738

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00600718

**Transaction ID : SB23.18061**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY CAROL JACK ID# 8739

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00600718

**Transaction ID : SB23.18062**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 157 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY MILES RUTHERFORD ID# 5257

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2016					

FEC Identification Number

C C00600718

**Transaction ID : SB23.18063**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY ALLAN THOMAS ID# 7386

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2016					

FEC Identification Number

C C00600718

**Transaction ID : SB23.18064**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY HAROLD BLOOM ID# 8740

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2016					

FEC Identification Number

C C00600718

**Transaction ID : SB23.18065**

Amount of Each Disbursement this Period

3.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 158 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY STEPHANIE HOPPING ID# 8741

001

Candidate Name

**DAVIDSON, WARREN, , ,**Category/  
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.18066**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY DANNY UTTERBACK ID# 8418

001

Candidate Name

**DAVIDSON, WARREN, , ,**Category/  
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.18067**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY KEVIN DANIEL ID# 8125

001

Candidate Name

**DAVIDSON, WARREN, , ,**Category/  
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.18057**

Amount of Each Disbursement this Period

5.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 159 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY FRANCO GALLO ID# 8742

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	7					2	0	1

FEC Identification Number

C C00600718

**Transaction ID : SB23.18068**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY JAMES KAMPFER ID# 8743

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	7					2	0	1

FEC Identification Number

C C00600718

**Transaction ID : SB23.18069**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY MARK DEHLIN ID# 5319

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	8					2	0	1

FEC Identification Number

C C00600718

**Transaction ID : SB23.18070**

Amount of Each Disbursement this Period

15.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 160 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY DENNIS BINKLEY ID# 8744

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.18071**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	8			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.16189**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIDSON FOR CONGRESS**

Mailing Address 3235 HOMEWARD WAY

City  
FAIRFIELDState  
OHZip Code  
45014Purpose of Disbursement  
EARMARKED BY LEO FLORES ID# 9200

001

Category/  
Type

Candidate Name

**DAVIDSON, WARREN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	3			2	0	1	6		

FEC Identification Number

C C00600718

**Transaction ID : SB23.18123**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

25.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 161 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.16155**

Amount of Each Disbursement this Period

82.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY GREG GILL ID# 8650

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.16519**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY RAYMOND GREEN ID# 8651

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.16520**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

82.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 162 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY R.E. HOLMER ID# 8731

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.16521**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY JOHN KOTCIAN ID# 8652

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.16522**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY JAY THOMPSON ID# 8653

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.16523**

Amount of Each Disbursement this Period

6.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 163 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.16156**

Amount of Each Disbursement this Period

449.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY ANDREW HAZI ID# 8736

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17872**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY WILLIAM KELLENBERGER ID# 7028

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17873**

Amount of Each Disbursement this Period

50.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

449.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 164 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY DENNIS DUNN ID# 8745

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17886**

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY JON WONG ID# 5323

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17870**

Amount of Each Disbursement this Period

1.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY JUDITH BINDER ID# 8737

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17874**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 165 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY RICHARD GOSSELIN ID# 8738

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17875**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY CAROL JACK ID# 8739

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17876**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY MILES RUTHERFORD ID# 5257

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17877**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 166 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. JIM BANKS FOR CONGRESS, INC.**

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY ALLAN THOMAS ID# 7386

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				25				2016					

FEC Identification Number

C C00577999

**Transaction ID : SB23.17878**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM BANKS FOR CONGRESS, INC.**

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY HAROLD BLOOM ID# 8740

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2016					

FEC Identification Number

C C00577999

**Transaction ID : SB23.17879**

Amount of Each Disbursement this Period

3.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JIM BANKS FOR CONGRESS, INC.**

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY STEPHANIE HOPPING ID# 8741

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2016					

FEC Identification Number

C C00577999

**Transaction ID : SB23.17880**

Amount of Each Disbursement this Period

10.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 167 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY DANNY UTTERBACK ID# 8418

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17881**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY KEVIN DANIEL ID# 8125

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17871**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY FRANCO GALLO ID# 8742

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17882**

Amount of Each Disbursement this Period

10.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 168 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY JAMES KAMPFER ID# 8743

001

Candidate Name

**BANKS, JAMES, E, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17883**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY MARK DEHLIN ID# 5319

001

Candidate Name

**BANKS, JAMES, E, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17884**

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY DENNIS BINKLEY ID# 8744

001

Candidate Name

**BANKS, JAMES, E, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.17885**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 169 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	8		2	0	1	6		

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.16185**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JIM BANKS FOR CONGRESS, INC.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	3		2	0	1	6		

Mailing Address P.O. BOX 11431

City  
FORT WAYNEState  
INZip Code  
46858Purpose of Disbursement  
EARMARKED BY LEO FLORES ID# 9200

001

Category/  
Type

Candidate Name

**BANKS, JAMES, E, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 03

FEC Identification Number

C C00577999

**Transaction ID : SB23.18113**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	6		2	0	1	6		

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA

District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.16169**

Amount of Each Disbursement this Period

57.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

82.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 170 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY GREG GILL ID# 8650

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

FEC Identification Number

C C00608695

**Transaction ID : SB23.16526**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY RAYMOND GREEN ID# 8651

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

FEC Identification Number

C C00608695

**Transaction ID : SB23.16527**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY JOHN KOTCIAN ID# 8652

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

FEC Identification Number

C C00608695

**Transaction ID : SB23.16528**

Amount of Each Disbursement this Period

6.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 171 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY JAY THOMPSON ID# 8653

001

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00608695

**Transaction ID : SB23.16529**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	6		

FEC Identification Number

C C00608695

**Transaction ID : SB23.16170**

Amount of Each Disbursement this Period

549.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY ANDREW HAZI ID# 8736

001

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	6		

FEC Identification Number

C C00608695

**Transaction ID : SB23.17903**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

549.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 172 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY WILLIAM KELLENBERGER ID# 7028

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.17904**

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY DENNIS DUNN ID# 8745

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.17918**

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY JON WONG ID# 5323

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.17901**

Amount of Each Disbursement this Period

1.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 173 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY JUDITH BINDER ID# 8737

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA

District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00608695

**Transaction ID : SB23.17905**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY RICHARD GOSSELIN ID# 8738

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA

District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00608695

**Transaction ID : SB23.17906**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY CAROL JACK ID# 8739

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA

District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C C00608695

**Transaction ID : SB23.17907**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 174 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY MILES RUTHERFORD ID# 5257

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: LA

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00608695

**Transaction ID : SB23.17908**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY ALLAN THOMAS ID# 7386

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify)

State: LA

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00608695

**Transaction ID : SB23.17909**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY HAROLD BLOOM ID# 8740

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: LA

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00608695

**Transaction ID : SB23.17910**

Amount of Each Disbursement this Period

3.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 175 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY STEPHANIE HOPPING ID# 8741

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.17911**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY DANNY UTTERBACK ID# 8418

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.17912**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY KEVIN DANIEL ID# 8125

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.17902**

Amount of Each Disbursement this Period

5.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 176 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY FRANCO GALLO ID# 8742

001

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.17913**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY JAMES KAMPFER ID# 8743

001

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.17914**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY LAURA ZULUETA ID# 5149

001

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.17915**

Amount of Each Disbursement this Period

100.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 177 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY MARK DEHLIN ID# 5319

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2016

FEC Identification Number

C C00608695

**Transaction ID : SB23.17916**

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY DENNIS BINKLEY ID# 8744

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2016

FEC Identification Number

C C00608695

**Transaction ID : SB23.17917**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		08		2016

FEC Identification Number

C C00608695

**Transaction ID : SB23.16194**

Amount of Each Disbursement this Period

10800.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10800.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 178 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY TATNALL HILLMAN ID# 7073

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.18639**

Amount of Each Disbursement this Period

5400.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY ROBERTA HILLMAN ID# 9467

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.18640**

Amount of Each Disbursement this Period

5400.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.16193**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 179 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	3			2	0	1	6		

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
EARMARKED BY LEO FLORES ID# 9200

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 04

FEC Identification Number

C C00608695

**Transaction ID : SB23.18114**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	1			2	0	1	6		

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206City  
METAIRIEState  
LAZip Code  
70006Purpose of Disbursement  
CONTRIBUTION

001

Category/  
Type

Candidate Name

**JOHNSON, JAMES, MICHAEL, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

State: LA District: 04

GENERAL RUNOFF

FEC Identification Number

C C00608695

**Transaction ID : SB23.16184**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MOONEY FOR CONGRESS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

Mailing Address P.O. BOX 1863

City  
MARTINSBURGState  
WVZip Code  
25402Purpose of Disbursement  
CONTRIBUTION

001

Category/  
Type

Candidate Name

**MOONEY, ALEXANDER, XAVIER, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WV District: 02

FEC Identification Number

C C00506774

**Transaction ID : SB23.16154**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 180 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.16167**

Amount of Each Disbursement this Period

83.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY GREG GILL ID# 8650

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.16533**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY RAYMOND GREEN ID# 8651

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.16534**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

83.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 181 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY R.E. HOLMER ID# 8731

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.16535**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY JOHN KOTCIAN ID# 8652

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.16536**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY JAY THOMPSON ID# 8653

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.16537**

Amount of Each Disbursement this Period

7.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 182 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

FEC Identification Number

**C** C00461806**Transaction ID : SB23.16168**

Amount of Each Disbursement this Period

459.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY ANDREW HAZI ID# 8736

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

FEC Identification Number

**C** C00461806**Transaction ID : SB23.17934**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY WILLIAM KELLENBERGER ID# 7028

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

FEC Identification Number

**C** C00461806**Transaction ID : SB23.17935**

Amount of Each Disbursement this Period

50.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

459.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 183 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY DENNIS DUNN ID# 8745

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17949**

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY JON WONG ID# 5323

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17932**

Amount of Each Disbursement this Period

1.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY JUDITH BINDER ID# 8737

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17936**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 184 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY RICHARD GOSSELIN ID# 8738

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17937**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY CAROL JACK ID# 8739

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17938**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY MILES RUTHERFORD ID# 5257

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17939**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 185 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY ALLAN THOMAS ID# 7386

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17940**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY HAROLD BLOOM ID# 8740

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17941**

Amount of Each Disbursement this Period

3.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY STEPHANIE HOPPING ID# 8741

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17942**

Amount of Each Disbursement this Period

10.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 186 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY DANNY UTTERBACK ID# 8418

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17943**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY KEVIN DANIEL ID# 8125

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17933**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY FRANCO GALLO ID# 8742

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17944**

Amount of Each Disbursement this Period

10.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 187 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY JAMES KAMPFER ID# 8743

001

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17945**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY JOHN MELENDEZ ID# 9195

001

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17946**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY MARK DEHLIN ID# 5319

001

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17947**

Amount of Each Disbursement this Period

15.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 188 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY DENNIS BINKLEY ID# 8744

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.17948**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify)

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	8			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.16192**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL GOSAR FOR CONGRESS**

Mailing Address PO BOX 2967

City  
PRESCOTTState  
AZZip Code  
86302Purpose of Disbursement  
EARMARKED BY LEO FLORES ID# 9200

001

Category/  
Type

Candidate Name

**GOSAR, PAUL, ANTHONY, ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: AZ

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	3			2	0	1	6		

FEC Identification Number

C C00461806

**Transaction ID : SB23.18115**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

25.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 189 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.16165**

Amount of Each Disbursement this Period

82.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY GREG GILL ID# 8650

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.16547**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY RAYMOND GREEN ID# 8651

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.16548**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

82.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 190 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY R.E. HOLMER ID# 8731

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.16549**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY JOHN KOTCIAN ID# 8652

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

State: NJ District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.16550**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY JAY THOMPSON ID# 8653

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.16551**

Amount of Each Disbursement this Period

6.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 191 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	6		

FEC Identification Number

**C** C00386110**Transaction ID : SB23.16166**

Amount of Each Disbursement this Period

459.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY ANDREW HAZI ID# 8736

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify)

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	6		

FEC Identification Number

**C** C00386110**Transaction ID : SB23.17996**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY WILLIAM KELLENBERGER ID# 7028

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

**C** C00386110**Transaction ID : SB23.17997**

Amount of Each Disbursement this Period

50.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

459.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 192 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY DENNIS DUNN ID# 8745

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.18012**

Amount of Each Disbursement this Period

100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY JON WONG ID# 5323

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.17994**

Amount of Each Disbursement this Period

1.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY JUDITH BINDER ID# 8737

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.17998**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 193 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY RICHARD GOSSELIN ID# 8738

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.17999**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY CAROL JACK ID# 8739

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.18000**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY MILES RUTHERFORD ID# 5257

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.18001**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 194 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY ALLAN THOMAS ID# 7386

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.18002**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY HAROLD BLOOM ID# 8740

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.18003**

Amount of Each Disbursement this Period

3.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY STEPHANIE HOPPING ID# 8741

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.18004**

Amount of Each Disbursement this Period

10.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 195 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY DANNY UTTERBACK ID# 8418

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

FEC Identification Number

C C00386110

**Transaction ID : SB23.18005**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY KEVIN DANIEL ID# 8125

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C C00386110

**Transaction ID : SB23.17995**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY FRANCO GALLO ID# 8742

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C C00386110

**Transaction ID : SB23.18006**

Amount of Each Disbursement this Period

10.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 196 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY JAMES KAMPFER ID# 8743

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

FEC Identification Number

C C00386110

**Transaction ID : SB23.18007**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY JOHN MELENDEZ ID# 9195

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

FEC Identification Number

C C00386110

**Transaction ID : SB23.18008**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY LAURA ZULUETA ID# 5149

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 05

FEC Identification Number

C C00386110

**Transaction ID : SB23.18009**

Amount of Each Disbursement this Period

100.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 197 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY MARK DEHLIN ID# 5319

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

FEC Identification Number

C C00386110

**Transaction ID : SB23.18010**

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	6		

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY DENNIS BINKLEY ID# 8744

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

FEC Identification Number

C C00386110

**Transaction ID : SB23.18011**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	8			2	0	1	6		

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

FEC Identification Number

C C00386110

**Transaction ID : SB23.16191**

Amount of Each Disbursement this Period

4700.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4	7	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 198 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2016

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY TATNALL HILLMAN ID# 7073

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

FEC Identification Number

C C00386110

**Transaction ID : SB23.18642**

Amount of Each Disbursement this Period

2700.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2016

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY ROBERTA HILLMAN ID# 9467

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

FEC Identification Number

C C00386110

**Transaction ID : SB23.18643**

Amount of Each Disbursement this Period

2000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		08		2016

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 05

FEC Identification Number

C C00386110

**Transaction ID : SB23.16190**

Amount of Each Disbursement this Period

65.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

65.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 199 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY BRIAN PRYOR ID# 4543

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.18117**

Amount of Each Disbursement this Period

40.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Mailing Address P.O. BOX 905

City  
NEWTONState  
NJZip Code  
07860Purpose of Disbursement  
EARMARKED BY LEO FLORES ID# 9200

001

Category/  
Type

Candidate Name

**GARRETT, SCOTT, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	3			2	0	1	6		

FEC Identification Number

C C00386110

**Transaction ID : SB23.18118**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BUDD, THEODORE, P., ,**

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.16161**

Amount of Each Disbursement this Period

82.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

82.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 200 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY GREG GILL ID# 8650

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.16554**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY RAYMOND GREEN ID# 8651

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.16555**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY R.E. HOLMER ID# 8731

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.16556**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 201 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY JOHN KOTCIAN ID# 8652

001

Category/  
Type

Candidate Name

**BUDD, THEODORE, P., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.16557**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY JAY THOMPSON ID# 8653

001

Category/  
Type

Candidate Name

**BUDD, THEODORE, P., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.16558**

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BUDD, THEODORE, P., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.16162**

Amount of Each Disbursement this Period

499.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4	9	9	.	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 202 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY ANDREW HAZI ID# 8736

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18027**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY WILLIAM KELLENBERGER ID# 7028

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18028**

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY DENNIS DUNN ID# 8745

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18042**

Amount of Each Disbursement this Period

200.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 203 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY JON WONG ID# 5323

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18025**

Amount of Each Disbursement this Period

1.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY JUDITH BINDER ID# 8737

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18029**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY RICHARD GOSSELIN ID# 8738

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18030**

Amount of Each Disbursement this Period

5.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 204 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY CAROL JACK ID# 8739

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18031**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY MILES RUTHERFORD ID# 5257

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18032**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY ALLAN THOMAS ID# 7386

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18033**

Amount of Each Disbursement this Period

10.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 205 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY HAROLD BLOOM ID# 8740

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18034**

Amount of Each Disbursement this Period

3.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY STEPHANIE HOPPING ID# 8741

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18035**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY DANNY UTTERBACK ID# 8418

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18036**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 206 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY KEVIN DANIEL ID# 8125

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				27				2016					

FEC Identification Number

C C00614776

**Transaction ID : SB23.18026**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY FRANCO GALLO ID# 8742

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				27				2016					

FEC Identification Number

C C00614776

**Transaction ID : SB23.18037**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY JAMES KAMPFER ID# 8743

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				27				2016					

FEC Identification Number

C C00614776

**Transaction ID : SB23.18038**

Amount of Each Disbursement this Period

5.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 207 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY LAURA ZULUETA ID# 5149

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18039**

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY MARK DEHLIN ID# 5319

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18040**

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY DENNIS BINKLEY ID# 8744

001

Candidate Name

**BUDD, THEODORE, P., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18041**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 208 OF 208

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HOUSE FREEDOM FUND**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Category/  
Type

Candidate Name

**BUDD, THEODORE, P., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	8			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.16188**

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY RAYMOND HILDEBRANDT ID# 9201

001

Category/  
Type

Candidate Name

**BUDD, THEODORE, P., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	1			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18120**

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address 321 MAPLEWOOD LANE

City  
ADVANCEState  
NCZip Code  
27006Purpose of Disbursement  
EARMARKED BY LEO FLORES ID# 9200

001

Category/  
Type

Candidate Name

**BUDD, THEODORE, P., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	3			2	0	1	6		

FEC Identification Number

C C00614776

**Transaction ID : SB23.18121**

Amount of Each Disbursement this Period

25.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

30.00

**TOTAL** This Period (last page this line number only).....▶

30165.00